

# CHEMIST & DRUGGIST

the newsweekly for pharmacy

November 10, 1990

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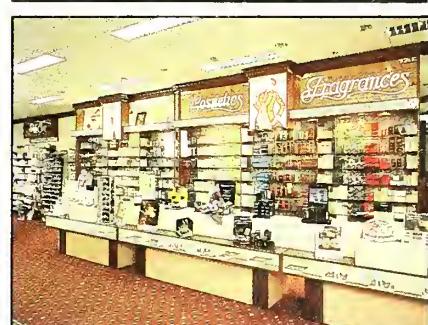
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**NPA practice leaflets in high demand**

**PSNI warning on Pharmacy sales**

**Unichem buy European option**

**Fronting PAGB: C&D interviews Sheila Kelly**



**Checking out the shopfitting trends**

#### Lyclear Creme Rinse Prescribing Information

**Presentation** Each 59ml bottle of Lyclear contains 1% w/w permethrin plus 20% w/w isopropanol in a creme-rinse base. **Uses** For the treatment of head louse (*Pediculus humanus capitis*) infections. **Dosage and Administration** Adults and children over 2 years: Shampoo hair as normal, rinse and towel dry. Shake the bottle thoroughly and apply enough Lyclear to saturate the hair and scalp. Leave on the hair for 10 minutes, then rinse thoroughly with water and dry in the usual way. **Contra-indications, warnings, etc.** Contra-indications: Hypersensitivity to permethrins, other synthetic pyrethroids, pyrethrins or chrysanthemums. **Precautions** For external use only. Wear gloves for multiple applications. Only use in children under 2 years under medical supervision. Use in pregnancy only if potential benefit outweighs the possibility of unknown risks. **Side- and adverse effects**: Adverse reactions are infrequent, mild and transitory, and are usually also symptoms of head louse infection. **Basic NHS Cost**: £168. Legal Category [P]. Further information available on request. **The Wellcome Foundation Ltd**, Crewe, Cheshire CW1 1UB. Lyclear is a Trade mark.



# LYCLEAR®

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Kills head lice in just one 10-minute application.

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# COMMENT

The publication this week of the seventh and final Rural Dispensing Committee annual report is a cause for nostalgia and some regret following its demise on September 17. In its short life — and after a long and difficult gestation period — the Committee served both the medical and pharmaceutical professions well. Whether the new mechanisms established by the Department of Health for dealing with the provision of pharmaceutical services in both rural and urban areas function so well remains to be seen. Certainly there are areas of concern.

The principal difficulty is that the new family health services authorities have to determine for themselves how they will process applications to dispense. Some authorities will make the whole FHSA responsible, others a section of the FHSA, while others will only appoint a couple of officers. This diversity will produce a wider spread of results and "case law" which could be open to challenge through judicial review. Also, this may be compounded because the FHSA will not only be responsible for deciding whether both rural and urban pharmacies are "necessary or desirable", but in rural cases it must now take on the job

of the RDC and judge whether the opening of a new pharmacy (or dispensing practice) will prejudice the proper provision of medical or pharmaceutical services in any area.

The urban application must preclude consultation with dispensing doctors while the rural application necessitates it — again this is where previously the RDC came in. This overlapping of responsibility at FHSA level could be a cause of confusion at best and at worst be open to sculduggery. The RDC was the single arbiter of the public's best pharmaceutical interests. Now there will be too many teams involved and teams of different sizes at that!

At appeal, in effect the system will be much as before in rural applications. Previously appeal was to the Secretary of State and dealt with, in reality, by civil servant's on his behalf — now appeal is directly to "mandarins" whose make up has yet to be defined. Pharmacists everywhere, especially those in rural areas, must share the hope of the last RDC chairman Patrick Benner, that Clothier's informal, flexible procedures have not been replaced by a formal process open to procedural challenge and delay. There has been more than enough of that already.

# NPA practice leaflets proving extremely popular

Some 750,000 practice leaflets have been ordered by National Pharmaceutical Association members, business services manager John Goulding reported at the Board meeting last week.

Members had commented on the leaflets' content and, as a result, a number of minor changes will be made to future editions and additional options offered, said Mr Goulding. The leaflets will be promoted to members again early next year.

**Competence to practise** In considering the Royal Pharmaceutical Society's recommendation that pharmacists should undergo assessments, the Board agreed that they should participate in continuing education to keep their knowledge up to date.

However, debate about compulsory assessment was inconclusive. The various threads of the discussions are to be compiled into a document to assist the Board in its deliberations at a future meeting. Representations to the Society are allowed until the end of January 1991.

**Pharmacy numbers** There was some concern about the continued growth in pharmacy numbers and suggestions that they should be significantly reduced. Abolition of the "cost plus" contract and the Government's failure to replace it with anything more meaningful than "recruitment, retention and motivation" meant there would not necessarily be any advantage to the Department in a "cull" of pharmacies or in rational location, the Board felt.

Care would be needed before arriving at a firm policy on numbers, but the Board unanimously agreed that any enforced "rationalisation" should take place only in a planned and structured manner in which unnecessary pharmacies could be objectively identified by clear criteria. Any proprietor forced to relinquish his contract must be properly compensated.

**Patent protection** Colette McCready, EEC liaison secretary, reported on the most recent meeting of the European Pharmacy Group. The Economic and Social Committee had sought views on its suggestion that patents should be prolonged by five years. Some delegates had confused the debate by arguing that a longer patent life would discourage use of "dubious" generic medicines.

The UK delegation had argued strongly that patent life should not be confused with the quality of generics, which was a matter for the various licensing authorities. The Board felt it would be helpful to reiterate NPA policy on patent protection. While not feeling competent to specify a number of years, members agreed that the patent protection period should be sufficient to encourage innovative manufacturers who risked investment in research.

**Bandages** After considering a Department of Health consultation document on the reclassification of bandages, the Board generally agreed with the proposals, in particular to separate light support (ie crepe) and conforming/stretch bandages from compression bandages

within the Drug Tariff classification. Bandages are often simpler to use, more comfortable and more effective than compression hosiery, providing patients or their carers were taught correct bandaging procedures, the Board felt.

**New CDs** The Board agreed to a Home Office proposal that midazolam be added to the other benzodiazepines in Schedule 4 to the Misuse of Drugs Regulations and that n-hydroxy MDA and 4-methyl-aminorex, which have no therapeutic use, be included in Schedule 1.

**Business aids vouchers** The Board agreed to a pilot scheme in which manufacturers would be offered NPA business aids money-off vouchers for use in sales promotion.

## Hospital pharmacies to be businesses

Removal of Crown immunity, anticipated for April 1 1991, will result in hospital pharmacies becoming pharmacy businesses, registered with the Royal Pharmaceutical Society, says Lindsay Howden, assistant secretary of the Scottish Department.

Hospital pharmacies will therefore be under the Society's inspectorate, and it will be possible for the health board (health authority in England and Wales) and their superintendent pharmacist to go in front of the Statutory Committee. Mr Howden speculates that, for example, in Scotland a superintendent pharmacist would be employed by each regional health board. Registration would also mean that manufacturing units will have to be inspected by the Medicines Control Agency.

Community pharmacists may find it easier to obtain specialised, "one-off" hospital formulations with the removal of Crown immunity, says Graeme Millar, chairman of the Pharmaceutical General Council, Scotland. He is optimistic that it will result in an "easier structure" for hospitals to supply community pharmacists on an invoice basis.

However, both the RPSGB and the National Pharmaceutical Association say it is too early to visualise any effects of removal of Crown immunity on the community pharmacy service.

Gordon Applebe, head of the law department at the Society, considers that any speculation is just "crystal ball gazing"; he does not foresee any effects in the medium to short term.

The NPA has not yet looked at the implications on community pharmacies, but will do so once the board has discussed it.

## EC Directive to affect dispensary computers?

An EC Directive covering computer equipment and software, to be implemented by December 1992, could have important implications for pharmacists who use dispensary or EPOS systems in their shops.

The regulations arising from the EC Directive on minimum safety and health requirements for work with display machine equipment (9/270/EEC 29/5/90, published June 21) will become part of the Health and Safety at Work Act.

The Health and Safety Commission is to issue a consultative document early in 1991, laying out exactly which areas the Directive will cover. Cash registers will not be included but most office computer equipment will be.

The Directive covers "any worker who habitually uses display screens as part of their normal work". Employers must take steps to ensure the work stations put into service after December 31, 1991, meet the minimum requirements of the Directive. Work stations already in service must meet specifications within four years from 1992.

The specifications governing the Directive are laid down in an annex, and cover key boards, display, reflection, glare, seating

etc. The annex also specifies that "software must be suitable for the task... must be easy to use and adaptable to the operator's knowledge and experience". Display must also be of a format and pace of use adapted to the operator.

The Directive specifies that workers shall be entitled to appropriate eye and eyesight tests, and that they should not be involved in additional costs. It also says that employers must plan the activity of their workers so that daily work on VDUs is periodically interrupted by breaks or changes of activity.

## ABPI Press ads on patents

A substantial national media campaign on the extension of patent life for medicines has been launched by the Association of the British Pharmaceutical Industry. This coincides with the opening of the new UK parliamentary session and is in advance of a European Council of Ministers meeting on November 27.

Bill Kirkness of the ABPI told *C&D* that the Association would be advertising over the next few days in publications such as the *London Evening Standard*, *Daily*

*Telegraph*, *Times* and *Financial Times Review*, as well as the MPs' publication, *The House Magazine*.

The advert says: "500,000 victims of Alzheimer's disease can be found in Britain. Without Government support the cure may not be". It calls for Government support for EC patent plans. The ABPI hopes the Council of Ministers will adopt a common position on pharmaceutical patents in March, for extended patent life to be implemented from January 1992.

## RDC submits last report

Increasing formality and challenging rural dispensing decisions in the courts on procedural grounds could increase expense and delay without any improvement in quality, according to Patrick Benner, chairman of the Rural Dispensing Committee.

In the Committee's seventh and last annual report, Mr Benner said he trusted the Committee was handing its successors a "broadly satisfactory legacy." He hoped that the flexible and informal procedures envisaged by Clothier would continue.

During the year ending March 31, the Committee received the same number of applications as in the previous year: two fewer from pharmacists and two more from doctors. There was a 46 per cent decrease in the number of notifications of family practitioner committee's decisions on rurality.

The Committee received 35 applications from pharmacists for preliminary consent and 17 from the previous year. Of these, 35 were granted, six refused, five withdrawn, one precluded and five were outstanding.

Some 37 applications were received from GPs and 13 were brought forward. Of these, 21 were granted in full, two in part, six were refused, five withdrawn and 16 remained to be decided.

The RDC was notified of 36 decisions by FPCs on the rurality of specified areas and five were brought forward. Appeals were received in 11 cases with another seven from the previous year. Five of these were rejected, three upheld, one upheld in part and nine were outstanding.

## OAPs supply drug addicts

Pensioners are selling sleeping tablets, most notably temazepam, to drug addicts, according to Merseyside police and doctors, reports the *Independent*.

Attempts to pin down the elderly suppliers are said to be proving difficult. One woman is reputed to have a network of elderly women supplying her with the capsules.

Jeremy Clitheroe, Liverpool LPC secretary: "This news comes as a complete shock to me." The LPC will now be expanding their meeting with the Drug Squad next Thursday to discuss the subject in depth. As Mr Clitheroe says: "Who better than the Drug Squad to advise?"

## Prescriptions up 3.71pc in pharmacies, and 5.74pc for GPs

There was a 3.71 per cent increase in the number of prescriptions dispensed by pharmacy and appliance contractors in England between April 1989 and March this year — 356,364,096 compared to 343,617,706 last year.

Figures published in the Prescription Pricing Authority's annual report show that this was accompanied by a 5.74 per cent rise in the number of prescriptions dispensed by doctors over the same period.

The average cost per prescription dispensed by pharmacists rose to £6.33 (up 5.06 per cent) compared to an average cost of £6.81 (up 5.18 per cent) for those dispensed by doctors. The number of hospital FP10(HP) forms dispensed also

increased by 8.33 per cent to 2,765,917.

When the average cost per prescription was linked to family practitioner boundaries, prescriptions dispensed by pharmacists ranged from £6.82 in South West Thames to £5.99 in North Western. This compared with dispensing doctor's figures ranging from £6.60 in South East Thames to £7.41 in North West Thames.

Analysis of the total number of prescriptions dispensed for Family Practitioner Committees showed the average number of prescriptions per patient was highest in Barnsley (10.19) and lowest in Brent and Harrow (5.21). The average cost per patient ranged from £60.79 in North Tyneside to £33.30 in

Enfield and Haringey.

During the year under review the PPA processed 391 million prescription items and maintained an accuracy level of 99.9 per cent in value terms, says chairman G. M. Dinsley. This was accompanied by an overall 2.5 per cent improvement in productivity.

There are clear indications that the PPA is on target to implement the indicative prescribing system in April 1991, says chief executive Alan Hilton. The Government's requirement that monthly expenditure reports be sent to medical practices in England within one month after the month of dispensing will mean a reduction in the PPA's operating and processing system from the current 20-21 days to 14 working days.



## Reshuffle sees Waldegrave in, Clarke out

In the Cabinet reshuffle prompted by the resignation of the Deputy Prime Minister Sir Geoffrey Howe, Kenneth Clarke, the Health Secretary, has moved to take over Education, and has been replaced by the Minister of State at the Foreign Office, William Waldegrave.

With his appointment as Health Secretary, 44-year-old William Waldegrave becomes the youngest member of the cabinet.

His elevation to a place round the coffin-shaped table in the Cabinet room at 10 Downing Street also reinforced his reputation as a political high flyer who is destined to be at the centre of power in the Conservative Party, whether it is in or out of

office, for many years to come.

Health professionals who attach importance to the possession of a comforting bedside manner will welcome Mr Waldegrave's emergence as the replacement for the more abrasive and combative Kenneth Clarke, who added to his reputation as a political bruiser in carrying through the legislation to reform the NHS.

Mr Clarke was accorded less recognition for his success in watering down the earlier privatisation mixture concocted by Margaret Thatcher, the Prime Minister.

Mr Waldegrave, an old Etonian, is renowned for combining doggedness with

durability. While the medical profession, and the BMA in particular, can expect a smoother ride in the immediate future the familiar landmarks of value for money and tight control over expenditure on drugs will still be clearly in view.

Mr Clarke's second spell at the Department of Health — he was Minister of State in the joint DHSS under Norman Fowler in the mid-80s — was a period of great controversy. During his two years in charge, Mr Clarke took on the doctors over NHS reforms, withstood a long, bitter ambulance dispute, promised a wider definition of pharmaceutical services, and imposed the last remuneration package on PSNC.

# PSNI closure threat to unsupervised pharmacies

The Statutory Committee of the Pharmaceutical Society of Northern Ireland has issued a stern warning to pharmacy proprietors that if a pharmacist is not on duty in their premises, they would be "closed forthwith".

The ruling came from a meeting of the Committee in Belfast on October 25. It warned that those failing to comply would be struck off, and recommended that the DHSS should prosecute offending pharmacists.

The Statutory Committee hearing last week dealt with the case of Mr John Campbell Gouk, the proprietor of two pharmacies a few hundred yards apart in Comber, co Down.

The Committee was told that when a DHSS inspector called at one of the pharmacies in The Square, Comber, on May 26, he bought a bottle of Benylin expectorant and a packet of Nurofen tablets from an unqualified lady assistant who was not acting under the supervision of

a pharmacist. Mr Gouk was found to be in his other pharmacy in Hill Street, Comber, at the time.

Solicitor Patrick Cross, for Mr Gouk, told the Committee that his client immediately admitted the offence when he was summoned by telephone to his premises in The Square, and took full responsibility.

Mr Cross said there were mitigating circumstances: a locum had been on duty in the premises in The Square on the Saturday in question, but she had gone home suddenly after a phone call to say her son was ill.

Mr Cross also said Mr Gouk had been in practice in Comber for 34 years. "He has served the community for all of that time, has never had a complaint made against him and has never been before a Statutory Committee before," the solicitor said.

Mr Gouk gave a solemn undertaking to the Committee that the occurrence would not be repeated. Committee chairman Charles Hill, QC, warned Mr Gouk that if any further offences of

this nature occurred he would be struck off.

Noting that the DHSS had not prosecuted in this instance, Mr Hill said the Committee's feeling was that in future the Department should "lean towards prosecution in such cases".

Mr Hill said the Committee had reached a compromise between striking off Mr Gouk and taking no action at all. He said it would be unfair to seek a prosecution at this stage.

The Committee chairman added: "For the guidance of the profession generally, we indicate that where unforeseen circumstances arise where a pharmacist is not on duty, the premises should be closed forthwith. Pharmacists who are guilty of this kind of breach in future should be prosecuted."

Mr Hill said the warning also applied to locums. He said the lady pharmacist who had to leave Mr Gouk's pharmacy in an emergency should have ensured that the premises were closed when she left.

## Flu vaccine shortages...

Publicity about last Winter's influenza epidemic being associated with an extra 25,000 deaths appears to have been a victim of its own success, with vaccine manufacturers reporting near exhaustion of stocks.

The figure was put out by chief medical officer Sir Donald Acheson at the same time as reminding GPs who should be vaccinated against flu. According to the Government about 10 million people fall into "at risk" categories, but it is thought that only a third of these are vaccinated.

The shortage of vaccines, most evident in Scotland, appears to have its roots in under-ordering in the Spring by GPs preoccupied with their new contract. Scotland was hit more severely by last Winter's epidemic and pharmacists there are being inundated with prescriptions for flu vaccines, according to Falkirk pharmacist Ian Mullen.

"It is perhaps also time for the Department of Health to consider a scheme for the funding of the annual contingency stocks of flu vaccines to deal with variations in demand," he suggests. People not "at risk" should not use up doses, he adds.

The Influenza Monitoring and Information Bureau said: "If patients and GPs continue to demand vaccine only when a flu outbreak or epidemic threatens, the problems of supply will continue".

Bob Cox of Mérieux UK Ltd said the company expected to be able to meet all advance orders but otherwise they were out of stock. They were seeking extra supplies from Europe.

Product manager Duncan Lawson of Duphar Laboratories Ltd said the company's earlier reserve of 200,000 doses had gone. It was subsequently obtaining a further 100,000 doses from Holland for distribution at the end of the month.

## Kendal Co

*C&D* reported on October 20 that Fresenius had bought Kendall Laboratories. There has been some confusion following this announcement of the availability of products from the Kendall Company — a different firm. Their products — Curity, Finger Bob, Lastosheer, Lastonet, Lasto-thread, Lastoyarn and TED — are still available from their Basingstoke address. The customer services number is 0256 468696.

## Gripe water 'alcohol alert'

National newspapers last Thursday warned mothers not to give gripe mixture to their babies, following an article in this month's *Health Visitors Journal* which wrongly stated that they all contain alcohol.

The article was written by a paediatrician and a pharmacist from Sheffield Children's Hospital, who claimed that gripe mixture to babies was like whisky to adults.

However, at least two — Smithkline Beecham's Dinnefords and LRC's Woodward's gripe mixtures — contain no alcohol.

Both were reformulated in August, Dinnefords as single-use vials, and Woodward's with a non-alcoholic preservative. LRC suggested to *C&D* that the article could have been written prior to the reformulation.

Press coverage was also given to findings about other ingredients of gripe mixtures, such as sodium bicarbonate and sugar. LRC say that sodium bicarbonate neutralises gastric acid and helps to burp the baby; sugar makes the product palatable, but should not be given for long periods.

## Clarke moots MCA's 'next step' to freedom

The Medicines Control Agency could become one of the first "Next Steps" Agencies within the Department of Health giving it full managerial freedom, with more discretion in the use of resources.

In his last speech as Health Secretary, Kenneth Clarke told the MCA's first open meeting last week that he had commissioned a study to make proposals to turn the MCA into such an agency.

Mr Clarke said that whatever approaches the MCA was to adopt in the future its main role was unchanged: to ensure that medicines were "safe, effective and of high quality".

Mr Clarke said the MCA had a real success story to tell about its first 18 months. "Where the old Medicines Division was less successful was in providing an effective service to the pharmaceutical industry. Delays meant frustration to the industry and delays in the availability of medicines to NHS patients."

Professional hierarchies had been done away with, and the

work of the MCA had been split into six new business sectors, Mr Clarke said. This had already brought improvements in performance throughput. "Last year saw a significant reduction in licensing time for major new drugs. The mean time of 15 months (later said to be currently running at just 13 months) makes the Agency the fastest licensing authority in Europe," he said.

Mr Clarke added that the Agency was committed to abolishing the backlog in abridged applications by April 1992 and the review of fee structure underway would stabilise income and avert major fee rises in the future.

The Health Secretary said the MCA's involvement in Europe supported its achievements and future challenges. "The scientific standing of the UK in the field of medicines control is well reflected in the fact that the UK is rapporteur for over 40 per cent of multi-state licence applications received by the Committee on Proprietary Medicinal Products," he said.

## EC plant monographs

Harmonisation in assessing the safety and efficacy of plant drugs can best be achieved by the development of European monographs on medicinal uses.

Peter Bradley, chairman of the European Scientific Cooperative for Phytotherapy's scientific committee, believes that these monographs, if accepted by regulatory authorities, would resolve questions of safety and efficacy and provide data for marketing applications.

Development of these monographs can only be achieved by a combination of academic and industrial resources using available scientific literature and advice from international experts, said Mr Bradley. ESCOP believes it can find and co-ordinate these resources.

At present, there are wide differences among member countries in the number of plant drugs accepted as safe and efficacious, in the permitted indications and in the timetable for reviews.

ESCP estimates that between 200 and 250 monographs are required, representing some 10-12 years work. During the first year, five proposed monographs had been completed, including ones for *Frangulae cortex*, *Senniae folium* and *Valerianae radix*. A further six are in production.

The monographs, once compiled, are circulated for appraisal to an independent board of supervising editors, academics and phytotherapy experts.

ESCP are hoping for an early response from regulatory authorities regarding the future adoption of these monographs as official publications.

**Tandem IQ** packs will not be changed, Larkhall Natural Health have announced after taking legal advice. The company was reacting to the recent BBC TV "Food and drink" programme (C&D, November 3, p772), which criticised supplements using "IQ" in their names.

Larkhall described the programme as biased "trial by television" and claim they had no opportunity to state their own case. They believed Dr David Benton's reported statements on the programme were disputed by him, and he remained a supporter of the company's approach.

Larkhall say the programme ignored the fact that a significant minority of children do not have a nutritionally balanced diet, and remain convinced that they benefit "in terms of concentration spans and school performance".



Pharmacist Rod Clarke from the Four Oaks branch of Lloyds Chemists is pictured with his trophy after winning the Pharmacist of the Year award. His prize was "Dinner for two on Concorde." The questionnaire-style competition, run in all Lloyds branches, was sponsored by Sterling Health

## Court reluctant to review ABPI decision

A pharmaceutical company failed last week in its attempt to establish a right to market its "Doctor's surgery organiser", a rack of branded medicine samples for GPs to display on their premises.

The High Court dismissed an appeal by Professional Counselling Aids Ltd, against a ruling by the Association of the British Pharmaceutical Industry's Code of Practice Committee that the samples rack might bring discredit upon or reduce confidence in the industry.

The fact that the judge agreed to hear the case at all marked an important extension of the court's powers to police quasi-judicial bodies. Despite objections from the Committee, the judge decided he did have power to review its decisions. However, it was concluded that there were no legal grounds on which the court could overturn the decision.

The judge went on to say that

he was bound by a Court of Appeal ruling which had extended the reach of the law and was "likely to enlarge enormously the scope of those who are subject to judicial review, with the consequential swamping of the courts in what are essentially domestic issues, and an imposition on domestic bodies of a standard and code of conduct which it was never intended they should have."

During the court hearing, Mr Michael Beloff, QC for the Committee, had argued that its decisions were not subject to judicial review.

But Mr Andrew Collins, QC for the company, contended that the Committee was acting in the public interest by controlling the advertisement of medicinal products, and was therefore susceptible to review. The company also argued that it had been unfairly deprived of an opportunity to make oral submissions to the Committee.

## Prescribing advice to GPs — "cost not no 1"

Advice to doctors on prescribing rationally without putting cost first has come from Professor Geoffrey Booth and Dr Barry Strickland-Hodge.

In an article in *Pulse*, the authors from Bradford University's pharmacy practice unit recognise the need to assess appropriateness, safety, effectiveness and cost. "Cost constitutes only one consideration and should be the last."

Generic prescribing, restricting the number of days treatment, cutting prescribing for minor ailments and reducing overall script numbers are all options, say the authors.

Professor Booth and Dr Strickland-Hodge also highlight

the cost benefits of moving products from POM to P. In the case of loperamide and hydrocortisone the legal status change had brought an estimated saving of £92.7m.

The use of triple prescription pads, where a patient is given a prescription in three parts for dispensing monthly, should also be considered. However, doctors should be aware of potential problems when changing drug treatment.

Generic prescribing would only have a limited effect on costs say the authors, as many drugs are not available generically. Equivalent bioavailability for sustained release formulations should also be considered.

## ITV looks into drug promotion

The promotional practices of pharmaceutical companies were attacked in ITV's "First Tuesday" earlier this week. The programme inferred that companies regularly breached the Association of the British Pharmaceutical Industry's code of practice, and asked whether there should be statutory controls.

Pharmacist Miall James alleged on the programme that samples were widely distributed to doctors, in excess of the code of practice guidelines which says a sample should not represent more than four days supply. GPs offered to barter them, he suggested, while dispensing doctors supplied them to patients and claimed payment from the Health Service.

The level of corporate hospitality and subsidy extended to doctors attending "symposia" came under scrutiny as the documentary sought to highlight the potential conflict of interest between ethical prescribing and commercial interests. Most doctors who were prepared to comment felt they were not influenced by such events.

A number of former reps were interviewed on the programme who claimed abuse of the industry's code of promotional practice was widespread. It was emphasised that there was no suggestion that such practices were continuing, or that they were common throughout the industry.

## Ad awards

Advertisements featuring Euthymol and Autan were successful in this year's Consumer Press awards.

Euthymol "Henry Moore's tube" was judged campaign of the year, as well as winner in the cosmetics and fragrances, and the best use of research categories. "Van Gogh's tubes" was judged winner of the best national newspaper campaign.

Advertisements for Scholl's Autan came out on top in the holidays and travel category and the best creative/opportunistic use of the medium.

Other winners included Cow & Gate's herbal juice range in the mother and baby sector. Highly commended was the Metatone tonic in the 50 plus section. Boots' Soltan range was commended in the cosmetics and fragrances sector.

## Solicitors confer on Valium and Ativan claims

Solicitors representing over 2,500 people were to meet in Bristol on Friday to co-ordinate legal proceedings against benzodiazepine manufacturers Wyeth and Roche.

A directions hearing will take place before Mr Justice Kennedy, the judge nominated to deal with the litigation. The purpose of the hearing is to formalise the co-ordinated arrangements to enable all tranquilliser claims to be dealt with by the Court.

Because the hearing is in private, solicitors say it would be inappropriate for them to comment beforehand. However, details of the co-ordinated arrangements ordered by the judge will be released after the hearing.

Around 550 firms of solicitors now represent over 2,500 clients in their claims against the manufacturers of Ativan and Valium — Wyeth and Roche.

Wyeth say that they intend to defend the legal proceedings vigorously.

Roche spokesman Andrew Craven said that the company's conduct in any legal action will be to defend their position as a reputable pharmaceutical manufacturer. He said: "We have at all times acted responsibly, and we reject any charge against the company."

## Opren ruling soon

Mr Justice Hidden reserved judgment in the High Court in London on November 5 over a test case in which 17 alleged victims of the arthritis product Opren are seeking the right to bring a damages action against the American company Eli Lilly. The judge hoped to give judgment within a month.

The hearing, which lasted more than three weeks, focused on the preliminary issue of "limitation", the statutory rule which limits the time within which civil actions can be brought.

It was not concerned with whether there was any ultimate liability on the part of the company, its subsidiaries and co-defendants. They all deny every allegation.

# TOPICAL REFLECTIONS

by Xrayser

## New 5p fails to tip scales

Nobody likes our new toy town money — me, the customers or my weighing machine. This fine example of the foundry man's art has served me well, and as long as Avery were prepared to service it, I had hoped it would continue to earn its 5p keep.

Originally designed to take the old 1d, it was converted on decimalisation to a new 1p, and then, after the early '70s hyper-inflation, to the present 5p. The new 5p, however, is too light to trigger the mechanism and now the Treasury has announced no more old 5p coins after December 31 this year!

I don't want one of those new fangled, computerised machines because, apart from liking the old familiar in my small shop, a new one would never pay for itself. The only hope on the horizon is a change of the 10p coin to a new, smaller toy town version. My bank tells me it is on the agenda, but they don't know when. If they don't hurry up, come January I will be selling tokens of old 5ps for new 5ps!

## In the '150th' bag!

I think the Royal Pharmaceutical Society sesquicentenary celebration carrier bags produced by the National Pharmaceutical Association are brilliant, and must bear the message of our professional heritage to a wider audience than has ever previously been achieved. There are some who may feel that the beautiful "Anniversary Collection" announced for sale to members by the Royal Society is sufficient, but we have always been a profession of the market place, and to remind the public proudly that we are different can do nothing but good. Practice



leaflets, patient medication records, domiciliary services, residential homes, patient counselling, cholesterol testing, drug information — it is all happening in community pharmacy.

Without even realising it, pharmacy is rising to the challenge of its own future, and is rapidly convincing the public of the essential nature of its service. Next year's celebrations are the ideal opportunity to reinforce that message, and with this superb quality of promotional material, that challenge will be well met.

## Getting the needle!

The NPA exhorts us (in its November Supplement) to encourage at-risk patients to be vaccinated against flu. A sentiment I cannot disapprove, but one which I cannot but resent. I have only used three vaccines so far this year, yet the queues in the local surgeries have been reminiscent of the New Year sales. The final straw was the patient who was disinclined to pay a prescription charge having been told by her GP that, as he was now out of stock, she would have to go to her local pharmacy and collect the vaccine — "But don't worry, you won't have to pay for it!"

The Treasury are presently losing thousands of pounds in unpaid prescription tax, lost discounts and increased fees to doctors, but when things go wrong the buck is passed to the pharmacist who receives all the blame and none of the benefits.

For the patient, "one-stop" vaccination must be the preferred system, and since the medical profession obviously concur their contract should be altered to acknowledge this responsibility. I, for one, will be more than happy to see the back of this annual charade, and leave the doctors to sort out their own problems!

# £1.5m advertising support that's not to be sneezeed at.

**B**eechams Hot Remedies are made by Smithkline Beecham – the leaders in cold and flu remedies.

What's more they contain a tried and trusted Beechams formula which really does offer fast, effective comfort and relief from the symptoms of colds and flu.

This winter we're making sure your customers know just how effective our Hot Remedies are, by spending a healthy £1.5m on national T.V. advertising.



And each of the three Hot Remedies in the range, Beechams Hot Lemon, Beechams Hot Blackcurrant and Beechams Hot Lemon with Honey – has a new bold/medicinal look to the packaging too.

In this winter's fight against colds and flu, they're going to be your hottest property. So make sure you've got plenty in stock.

**SB**  
**SmithKline Beecham**  
Consumer Brands

# COUNTERPOINTS

## Clarins go brown for Winter

Clarins have come up with a self-tanning regime aimed at helping consumers through the "pale" Winter months. The regime includes a new product for the face plus an update of the original Clarins self-tanning milk.

Both products contain dihydroxyacetone, a self-tanning ingredient said to be absorbed by the surface skin. Both lines have a SPF of 4 and contain moisturising ingredients including sorbitol and glycerine.

The self-tanning milk has been given a new formulation and a creamier texture. It has also been repacked in a 125ml golden tube. The colour from this product is said to last for approximately three days.

Self-tanning sun-wrinkle-control cream comes in a 75ml tube and is said to have been specially formulated for the specific needs of the face. Its SPF4 is also said to help minimise the harmful effects of UV light on the face.

Colour is said to start coming through within 30 minutes and the product is said to be easily absorbed into the skin without leaving a residue. Both products retail at £9.75 and will be available from mid-January. *Clarins (UK) Ltd. Tel: 071-629 2979*

## Lucozade gold hits TV

A new national television advertising campaign for Lucozade original was screened for the first time this week.

Focusing on the brand's glucose energy benefits, the commercial "Lucozade gold" continues on a sporting theme by using American football and swimming themes. It is part of a total spend of £1.2m for the brand this year. *Smithkline Beecham Drinks. Tel: 081-560 5151*.

## Seven Seas look to beauty oils

Seven Seas Healthcare have introduced a unique new range of oral supplements called Health for Beauty oils.

The range is a development from the recent surge of public interest in natural oils, says the company.

The health benefits of these oils, including cod liver oil, evening primrose oil and garlic oil, are scientifically proven, say Seven Seas who claim to have progressed this concept to develop a range of dietary supplements that offer both health and beauty benefits.

Each product in the range is based on natural plant oils that have an established link with a particular area of beauty care. Specific vitamins and essential fatty acids have been added for increased benefit to the maintenance of hair, skin and nails, says the company.

The range comprises: avocado oil with borage oil and vitamins A, D and E for dry skin; passion flower oil with oil of evening primrose for helping to maintain skin elasticity; peach nut oil with borage oil and vitamins A, D and E for hair; and almond oil with borage oil and vitamins A, D and E for nails.

The oils (£3.99) are available now and come packaged in pearlised, pastel-coloured slimline cartons containing one month's supply in a bubble pack.

## Neutrogena emulsion for dry skin

Neutrogena have introduced a Norwegian formula emulsion said to help bring relief to any dry skin problem.

The emulsion (200ml pump dispenser £5.95) uses the same moisturising system found in the



The one-a-day capsules are free from additives, preservatives and are non-fattening (each capsule contains only three calories, say Seven Seas).

A two-tier counter display unit has been designed to hold six of each variant plus a free information leaflet. Stockists using this display, when paid a surprise visit, will also receive a free basket of exotic fruits, say Seven Seas.

During the launch period there will be consumer promotions through selected women's publications.

Plans for a £450,000 advertising campaign during the peak selling period, January to April 1991, will be announced later this year, say *Seven Seas Healthcare Ltd. Tel: 0482 75234*.

Norwegian formula hand cream, says the company which claims that the product helps the skin to hold its moisture for eight hours or more. It is said to be richer than a lotion and lighter than a cream, and is quickly absorbed into the skin. *Neutrogena (UK) Ltd. Tel: 071-821 1984*.

*Napp* are supporting their Brush Off cold sore treatment with a new advertising campaign as well as consumer education leaflets and a new display unit. *Napp Laboratories Ltd. Tel: 0223 424444*.

## Rimmel Take Cover

*Take Cover* is the latest collection in the Rimmel cosmetic portfolio, designed specifically to help keep "reactionary" complexions under control.

The range is targeted at people with skins prone to excess shine, high colour, shiny patches or spots, which are all problems that are difficult to disguise, says the company.

The range comprises: colour corrector moisturiser (£1.79) which is said to help neutralise high colouring, it comes in a light green tube with gold graphics; hide the blemish (£1.09); oil control matte make-up (£1.59), a matt foundation said to combat shine without clogging the pores; and anti-shine powder (£1.29).

The range will be available from January next year, say *Rimmel International Ltd. Tel: 071-637 1621*.

## Bourjois go for class

Bourjois have introduced Classic lipstick aimed at women who require skincare properties in their cosmetics.

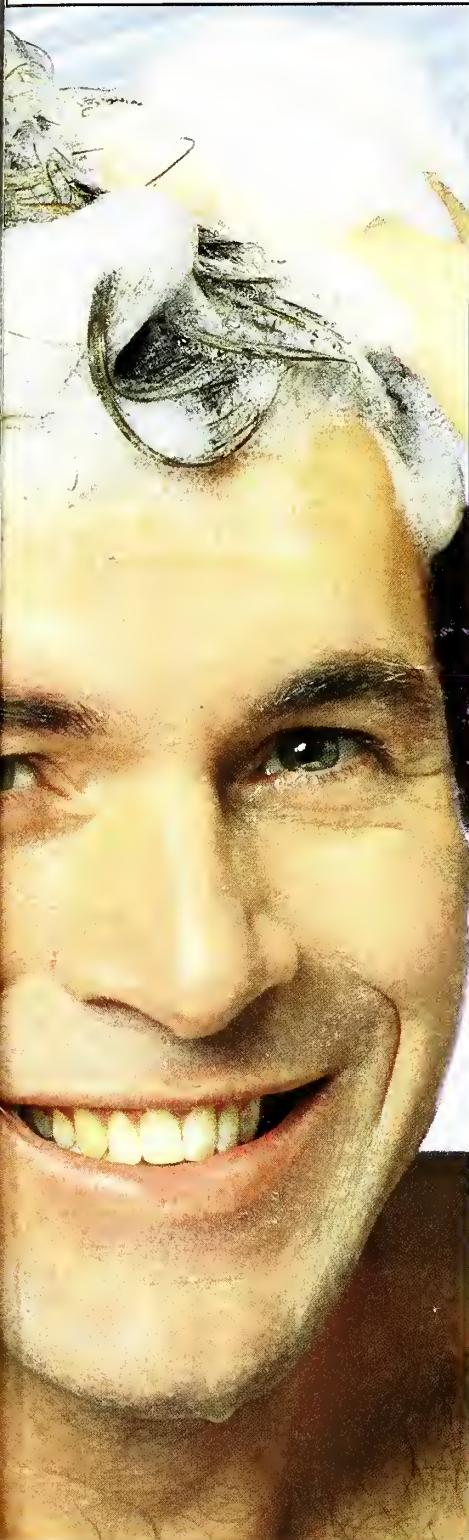
The lipstick contains vitamins A and E as well as a UV filter to protect the lips from the damaging effects of the sun. It comes in a range of 21 shades (£2.95) and is presented in a black case ringed with silver.

For the launch period, the company is featuring 12 of the shades on a promotional merchandiser with the price highlighted on the header card.

The launch will also be supported with a £250,000 television advertising campaign which is scheduled to begin next March. *Bourjois Ltd. Tel: 071-499 2605*.

*Seton* have acquired the Slinky bandage range from Cuxson-Gerrard (see also *Business News*, p861). *Seton Healthcare Group Plc. Tel: 061-652 2222*.

# THE DENOREX SENSATION.



IT WORKS  
FOR HIM.



AND WORKS  
FOR HER.

New *Denorex* anti-dandruff shampoo is specially formulated to combine the proven effectiveness of coal tar with the cooling anti-pruritic effect of menthol. So as well as working to clear dandruff, it leaves the scalp feeling fresh and invigorated.

*Denorex* fills the gap between medical shampoos and more cosmetic brands by being both highly effective and pleasant to use. So it will work for all your customers.

National colour press advertising will be telling your customers about the sensational feel of *Denorex*. And since it is only available in pharmacies – it'll really work for you too.

**Denorex**  
ANTI-DANDRUFF SHAMPOO

*with menthol*  
CLEARS DANDRUFF  
•  
RELIEVES ITCHING  
•  
SOOTHES IRRITATION &  
REFRESHES THE SCALP  
•  
COOL HERBAL  
FRAGRANCE



\*Trademark

DENOUREX.  
IT'LL WORK  
TWICE  
AS HARD  
FOR YOU.

## No change for Swaddlers support

Swaddlers say it is "business as usual" for Togs and Cares, in spite of a possible merger with Procter & Gamble. Speaking after it was revealed that Angelini's Fater Group, Swaddlers parent company, are discussing a European-wide joint venture with P&G, managing director Jim Clough said plans are well advanced for supporting the two brands in 1991.

"Regardless of any future changes associated with the proposed merger, there are no current plans to change our operation and we have in place our annual brand support plans to ensure Togs and Cares continue to grow as they have this year," Mr Clough said.

"With a £10.5m support fund, our intention is not only to continue to market Togs and Cares vigorously, but to expand our brand portfolio. As talks with P&G start it's possible new initiatives will emerge, but it is too soon to speculate," Swaddlers Ltd. Tel: 091 482 5566.



## Modern Health set to increase margins

Modern Health Products have relaunched their traditional herbal remedies range with an increased margin — up from 33 to 40 per cent.

The company offers stockists 11 licensed herbal remedies for common complaints and minor illnesses. The range is now repackaged with labels proclaiming their licensed usage.

Remedies include Garlodex for colds and catarrh, to Sunerven to help reduce stress. Digest, Liminate, Cancade, Kleer and

Sinotar were all introduced to the range in August.

"Market research we have carried out indicates a real need for margin improvement," says Liam Dowling, marketing director of Modern Health. "With full product licences, these herbal remedies can now be sold specifically for a range of ailments."

The range is supported by full Data Sheets, available on request. Modern Health Products Ltd. Tel: 081-397 4361.

## Gazza for Christmas

Elida Gibbs are offering a Brut Christmas display kit featuring the star of their advertising campaign, Paul Gascoigne.

The "Gazza" display kit, which is free of charge to stockists, comprises a full size colour stand up showcard, two shelf talkers and a poster.

Gascoigne was signed by Elida Gibbs earlier this year to star in a £1.3m television and poster advertising campaign for Brut which will run from late November through to Christmas. Elida Gibbs Ltd. Tel: 071-486 1200

## Wella offer money back

Wella are offering consumers a £1 cash refund on their Scandinavian blonde hair streaking kit.

To claim the free £1 coin consumers are asked to collect a cash refund coupon from point of sale, complete it and send it to the given address. Wella (GB) Ltd. Tel: 0256 20202.



## Britain's leading range of Quality Diabetic Products

(Wider choice, better value)



Order now your carriage paid introductory offer from your wholesaler or A L Simpkin & Co Ltd, Hunter Road, Sheffield S6 4LD Telephone: (0742) 348736 Fax: (0742) 325635

Simpkins

# THE RESULTS OF MUCH CONCENTRATED EFFORT.



At Robinsons, we're always thinking of new ways to help you squeeze extra profit from the baby drinks market.

Which is why we've just launched a new range of Robinsons pure concentrated fruit juices.

The range includes Apple, and Apple & Cherry. As well as a new recipe Delrosa Apple & Orange with Rosehip.

With our established lead across all three growth sectors of the baby drinks market, Robinsons

now offers you even better profit opportunities in this fast growing market.



THE TASTE OF SUCCESS

# IMAGINE AN END TO VAGINAL DRYNESS FOR 3 MILLION WOMEN

3 million women in the U.K. can now benefit from new REPLENS.

To reach this massive £500 million market, Columbia Laboratories have launched a £4 million nationwide campaign. Using T.V., consumer and medical press plus extensive P.R. So make sure you're stocked ready for the demand, and for healthy sales.

New REPLENS is not a drug. It's a natural, long-lasting way to restore vaginal moisture. Helping women feel more confident and more comfortable.

With REPLENS, intercourse becomes spontaneous, again



there's no further need for old-fashioned, messy lubricating jellies.

Applied 3 times a week, REPLENS ends vaginal dryness and discomfort for good while maintaining normal vaginal pH.

Each pack contains pre-filled, slimline applicators.

They're discreet and easy to use. REPLENS is clinically tested and recommended by gynaecologists worldwide. So you can stock it with confidence.

Just imagine the difference it could make to a woman's life, and to your sales.



NEW  
**REPLENS**<sup>TM</sup>  
VAGINAL MOISTURISER

THREE APPLICATIONS A WEEK FOR FULL-TIME COMFORT

# Kim's Golden future

Golden Lady, Europe's largest hosiery manufacturer, have signed Kim Basinger, star of "Batman" and "9½ weeks", to appear on all their advertising and promotional material for 1991.

A television campaign is planned for the Spring, followed by a second burst in the Autumn, with a minimum spend of £750,000. Kim will also feature on posters, POS material and brochures. The total European media spend will exceed £10 million next year.

In Italy, where Golden Lady's factories turn out 320 million pairs of tights and stockings a year, the brand claims 22 per cent of the total hosiery market. It also has a significant presence in other European countries. In the UK, the company aims to achieve a 10 per cent share over the next five years and pharmacies are seen as an important target area. Golden Lady (UK) Ltd are extending their facilities with a move to new, purpose built offices and a 43,000sq ft warehouse at Sutton-in-Ashfield.

A wide range of styles and colours is available, from the best-selling transparent (£0.99) to the sheer glossy "gran luce" with 12 per cent Lycra (£2.50). The company claims that unique production facilities have allowed the development of high torque yarns which are sheer but resilient.

A small, compact box pack enables the retailer to save shelf space compared with the traditional wallet, and the packs come in their own counter display. A free stand is available on minimum orders of 600 pieces.

The brand is available through major pharmacy wholesalers, including Numark, Unichem and Vestric, some of whom also supply stands. *Golden Lady (UK) Ltd. Tel: 0623 551651.*

**Fashion model** Helen Norman, whose picture appeared in the recent Gerard House "ladies selection" advertisement, is to continue to promote the company's herbal remedies. She will soon feature in a new advertisement for Gerard House Kelp tablets. *Gerard House Ltd. Tel: 0202 434116.*



*Pickles have launched a nasal inhaler (£0.95) which contains menthol, pine oil, eucalyptus oil and methyl salicylate. The inhaler is an ideal and convenient product for nasal congestion which can be carried in the pocket at all times, says the company. Pickles nasal inhaler comes packed in 12s in a carton which can be displayed on the counter or hung by its back board. Details of bonuses are available from representatives or direct from J. Pickles & Sons. Tel: 0423 867314.*

## Franolyn support programme

Janssen's pharmacy division is initiating a programme of promotion and guaranteed pharmacy support for its recently acquired Franolyn cough treatment range.

Historically, the brand has received strong support from pharmacists in the form of recommendations, say Janssen. To build on this, the company plans an increased profit on return (33 per cent) and Winter bonuses. At the same time, the benefits of Franolyn are being made more widely known to the consumer, say Janssen Pharmacy Division. *Tel: 0235 772966.*

**Montagne Jeunesse** have won the "Green Star award" from *Prima* magazine in its November issue. *Prima* awarded the "Green Star" to the company for its "excellent" Antarctica Appeal Campaign, a charity fund set up to raise money and awareness to protect Antarctica as an "International World Wilderness Park". *Addis Ltd. Tel: 0992 584221.*

**The 2000 collection** from Boots now includes individual make-up base additives. The additives have been specially blended to complement all skin types and the company says they will help to enhance the performance of the 2000 individual make-up base. The additives include: hydra plus for dry skin; oil control plus; hydra + UV screen; oil control + UV screen and protect plus. Individual make-up base retails at £9.95. *Boots Co Plc. Tel: 0602 506111.*

## Rimmel focus on colour with range

Rimmel have introduced the Colour Focus collection, a combination of eye colour shades for the New Year.

The Eye Spy collection comprises 18 shades (£0.99) including khaki, grape, honey and chiffon.

Pearl Eyes comprises 12 shades in velvet or pearl formulations, including shades of blue, sage, copper and damson. The range will be available from January. *Rimmel International Ltd. Tel: 071-637 1621.*

## Mam now for all outlets

Following its introduction as a special offer at Chemex, the Mam pre-pack is now available generally from major wholesalers, say Mam (UK) Ltd.

Included in the free point of sale counter or shelf unit are two Mam baby nurser systems, four single bottles and 12 pairs of assorted Mam and mini Mam soothers.

The Mam pre-pack has a retail value of £46.78 and is available at £27.06 (trade). *Mam (UK) Ltd. Tel: 021-459 4304.*

### ON TV NEXT WEEK

GTV Grampian	U Ulster	SK Sky
B Border	G Granada	STV Scotland (central)
BSB British Satellite	A Anglia	Y Yorkshire
Broadcasting	TSW South West	HTV Wales & West
C Central	TTV Thames Television	TV South
CTV Channel Islands	TV-am Breakfast	TT Tyne Tees
LWT London Weekend	Television	
C4 Channel 4		

Aapri Gentles:	LWT, C, G, Y, STV, TSV, TTV
Healthcraft Range:	C4
Loving Care:	GTV, BTV
Minadex:	TV-am
Nurofen:	All areas
Sanatogen Multivitamins:	All areas except TV-am
Seven Seas Cod Liver Oil:	All areas
Slim-Fast:	All areas except CTV, C4 & TV-am

Personna International UK Ltd are pleased to announce that as from Monday the 22nd of October all sales and distribution of their mens and ladies shaving products to the wholesale and retail pharmaceutical trade will be handled by:—

**Dendron Ltd, 94 Rickmansworth Road, Watford, Herts WD1 7JJ.**  
**Tel: 0923-229251. Telex: 918405 DDD 5MG. Telefax: 0923 816806.**

## BWC attack five year testing criteria

Beauty Without Cruelty have launched a blistering attack on the current five year "not tested on animals" criteria as a means of perpetuating animal testing.

The company's managing director, Joseph Piccioni, said this week that the five year criteria means "very little". He said that although most cosmetic and toiletry companies do not directly test on animals, it is the preservatives in these products that are subject to stringent safety testing. Thus the well worn statement "ingredients have not been tested on animals for the past five years" allows a company to use any new ingredient that becomes available after that period.

Mr Piccioni also stressed that it can take up to five years for a new ingredient to be acceptable

for general use anyway. He says that his company rejects all new ingredients and instead only uses formulations that were in general use before September 27, 1976 — the date the European Community introduced its Cosmetic Directive regulating cosmetic and toiletry safety.

"We would consider ourselves to be hypocrites if BWC allowed itself to use new ingredients while claiming to be opposed to animal testing. We believe that the five year 'rolling' criteria allows the continuation of this horrific means of testing as some companies use animal tested ingredients after a delayed time period of five years. There are ample ingredients before the 1976 cut off date to satisfy consumer demands for beauty products," he says.

# Brush Off™

povidone-iodine  
COLD SORE TREATMENT

Supported by

**NEW**

- Advertising and press campaign
- Display unit
- Consumer education leaflets

HELP HER HELP HERSELF  
TO FAST EFFECTIVE  
COLD SORE TREATMENT

**Keep  
Brush Off  
on display**



Napp Consumer Products Division,  
Napp Laboratories Limited,  
The Science Park, Milton Road,  
Cambridge CB4 4GW

Member of Napp® Pharmaceutical Group.

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©Napp Laboratories Limited 1990



## AAH offer Aludrox

This month AAH customers can take advantage of the AAH/Aludrox promotion.

The promotion covers Aludrox indigestion mixture (200ml and 500ml) and Aludrox tablets.

Aludrox mixture 200ml has an offer price of £9.17 (rsp £1.49); Aludrox mixture 500ml is on offer at £18.10 (rsp £2.95) and Aludrox (60) tablets at £15.99 (rsp £2.60). AAH Pharmaceuticals Ltd. Tel: 0928 717070.

## Braun ask the men

Braun have introduced the "Flex control challenge" — a shaver testimonial television advertisement which will be shown nationally starting this week.

Braun spent several mornings stopping men on their way to work and asking them to try their Flex Control shaver. While the men shaved, their comments were recorded. The company are spending £1.6m on the advertisements. Braun (UK) Ltd. Tel: 0932 785611

## November promotions from Numark

Bodyform regular and super 20s head the list of added value packs on promotion with Numark during November. These packs will contain five free packs of pantyliners and the pantyliners 45s will also contain five free packs plus a travel wallet.

Other extra fill lines include Right Guard aerosol, roll on and pump; Ultrabrite; the Cussons range; Sure aerosol and roll on; VO5 shampoo plus and conditioner plus; the VO5 hairspray and styling range plus the Simplicity range. These products will be supported by a broadsheet promotion, whereby the retailer can obtain Marks & Spencer vouchers for different

qualifying levels of purchase across the range.

Other items on promotion include All Clear shampoo, Andrex toilet and family tissues, the Colgate range of toothpastes, Dimension plus a trial size, Duracell batteries, Hanimex Christmas packs, Heinz cans, Kodak films and cameras, Lucozade, the Nivea range, Pears shampoo, Polaroid instant film and camera 635CL, Ponds lotion and cream, the Reach range, Robinsons baby foods and juices, the Soft and Pure range, Timotei shampoo and conditioner, Togs, and Vaseline petroleum jelly. Numark Management Ltd. Tel: 0827 69269.

# COTTON ON TO BIGGER PROFITS WITH ROBINSON

## COSMETIC



## 100% PURE COTTON



## BABY



Robinson Healthcare market a complete range of Cotton Wool products for your customers. Products which offer them the very best value for money and generate maximum income for you.

For their "Soft & Pure" brand, Robinson produce a traditionally blended wool ideal for cosmetic use.

With the new perforated pleats, embossed and plain pads and varieties of balls, Soft & Pure is the comprehensive range for any woman's cosmetic needs.

With the Extra Soft range, Robinson bring you 100% pure cotton wool products to give your customer superior skincare. In research these products and their dramatic packaging received 100% support from women who care about their skin.



And for women who care about their babies' skin as much as their own, Robinson produce baby rolls, balls and pleats with a nursery style packaging in the sizes mothers prefer.

So buy the very best and cotton on to bigger profits with the market leading range from Robinson.

**ROBINSON**  
HEALTHCARE

HIPPER HOUSE  
CHESTERFIELD S40 1YF  
UNITED KINGDOM

# SAVE MONEY.

## CHANGE

## YOUR

## FLEET TO

## AUTOMATIC

## TRANSMISSION.

Fleets which use fuel cards from Shell have an automatic advantage. Precise information about their fuel purchases is transmitted to them on easily understood statements, which monitor quantities, locations and even vehicle mileage. Thus freeing you from the old manual system of pay-and-reclaim paperwork.

Petty disputes are ended, as a Shell Card only buys what you've authorised. And we give up to 36 days' interest free credit.



With interest rates and inflation squeezing your company, Shell Cards are an intelligent change of gear.

Find out more. Call Sarah Hart now, on 061-499 4197, or fill in the coupon.



I would like to know more about Shell Cards. Send to Sarah Hart, Shell UK Oil, Card Sales, FREEPOST, Manchester M22 5QL

Name \_\_\_\_\_ Position \_\_\_\_\_

Company \_\_\_\_\_ Fleet Size 1-5  6-10  11-50  Over 50

Address \_\_\_\_\_

Postcode \_\_\_\_\_ Telephone \_\_\_\_\_

# SCRIPT SPECIALS

## EPO indicated for breast pain

Scotia Pharmaceuticals have been granted a product licence for another evening primrose oil preparation, this time indicated for relief of breast pain.

Efamast is being launched on Tuesday for the treatment of breast pain. The rationale behind the product is that patients with mastalgia may have lower than normal levels of gamma linolenic acid and its metabolites. Because polyunsaturated fatty acids can modulate the binding of steroid hormones to their receptors, these low levels of GLA may increase the effects of normal concentrations of ovarian hormones.

**Manufacturer** Scotia Pharmaceuticals Ltd, Woodbridge Meadows, Guildford, Surrey GU1 1BA

**Description** Oblong soft gelatin capsules containing a clear yellow to yellow-green oil, printed with "Efamast". Each contains 40mg gamma linolenic acid (GLA) provided by evening primrose oil, plus vitamin E 10mg as an *in vivo* antioxidant. **Uses** Symptomatic relief of premenstrual breast pain (cyclical mastalgia) and non-cyclical mastalgia.

**Dosage** Three or four capsules twice daily, starting on the highest dose. Some patients may not respond for eight to 12 weeks because of the gradual onset of action. Once a clinical response has been achieved the treatment may be stopped or continued at a lower dose.

**Contra-indications, warnings etc** The doctor should be satisfied that the patient does not have breast cancer. Efamast may manifest undiagnosed temporal lobe epilepsy, especially in schizophrenics and/or those taking known epileptogenic drugs such as the phenothiazines. Physicians are advised to monitor carefully the effects of Efamast on patients taking these drugs or who have a history of epilepsy. No epileptic events have been reported in patients not being treated with phenothiazines. No

teratogenic effects have been seen in animals but caution is advised in the first trimester of pregnancy. It may be taken while breast feeding.

**Side effects** Nausea, indigestion and headaches have occurred occasionally.

**Pharmaceutical precautions** Store in a dry place, protected from heat.

**Supply restrictions** POM. **Packs** 224 capsules (14 strips of 16) £24.33 trade.

**Product licence** 4382/0010  
**Issued** November 1990

## Antepsin in suspension

Wyeth are introducing Antepsin suspension for the treatment of duodenal and gastric ulcer, chronic gastritis, and for prophylaxis of GI haemorrhage. It is a white to off-white viscous suspension with an aniseed/caramel odour, containing 1g sucralfate in 5ml.

The dosage is 2g twice daily, on rising and at bedtime, or 1g four times a day, one hour before food and at bedtime. Warnings, etc are as for the tablets.

Antepsin suspension (560ml £14 trade) is a POM, licence number 0011/0160. **Wyeth Laboratories**. Tel: 0628 604377.

## BRIEFS

**Hillcross** have added the following to their range: aluminium hydroxide tablets 500 (500mg £7.26), ampicillin syrup 100ml (125ml/5ml £0.75, 250mg/5ml £1.23), co-tenidone tablets (50 12.5mg £5.83, 100 25mg £8.30), magnesium trisilicate compound tablets 500 (£5.03), oily cream 500g (£1.76), pyridoxine hydrochloride tablets 100 (10mg £1.59, 20mg £1.33, 50mg £2.55), salicylic acid ointment 500mg (£3.57), trimethoprim tablets 100 (100mg £3.10, 200mg £4.53), and zinc and salicylic acid paste 500g (£2.96, all prices trade). **Hillcross Pharmaceuticals**. Tel: 0282 25932.

**Ashbourne Pharmaceuticals** have added the following products to their range: Indomax (indomethacin) 75mg SR capsules, 28 £7.20; Baclospas (baclofen) 10mg tablets, 100 £10.52; Oxytetraxim (oxytetracycline) 250mg tablets, 28, £1.90; Comixco (cotrimoxazole) 80/400mg tablets, 20 £3.00, 160/800mg tablets, 10 £2.27; paed suspension 40/200mg per 5ml, 100ml £2.37; Angiopine (nifedipine) 5mg capsules, 100 £7.35, 10mg capsules, 100 £10.97. All prices trade. **Ashbourne Pharmaceuticals Ltd**. Tel: 0604 882190.

**Broflex syrup and Biorphen liquid** have been transferred from Bio-Medical Services Ltd. Orders should be directed to **Bioglan Laboratories Ltd**. Tel: 0462 438444.

**Rikospray balsam** is now available in a 50g spray bottle, which replaces the previous size. The price remains unchanged. **3M Health Care Ltd**. Tel: 0509 611611.

**B. Braun Medical** have launched Injekt a two-piece syringe, which complies with ISO and BSI standards and is approved by the Department of Health. It is not prescribable on FP10. The syringes are available in units of ten within dispensers of 100 units. They come with luer-slip fittings (2ml £3.10, 5ml £5.70, 10ml £7.25, and 20ml £10.50) or luer-lock fittings (2ml £6.85, 5ml £8.20, 10ml £10.45, 20ml £17.05, all prices trade). **B. Braun Medical Ltd**. Tel: 0296 393900.

## Napp launch new range of morphine sulphate tablets

Sevredol is a new range of morphine sulphate tablets being launched by Napp Laboratories.

Unlike MST Continus, Sevredol tablets are not controlled release. They can be used wherever liquid morphine preparations are currently used, says the company.

Napp say this offers the advantage of ease of dispensing and administration, and that the film coating avoids the problems of taste associated with the liquid.

**Manufacturer** Napp Laboratories Ltd, Cambridge Science Park, Milton Road, Cambridge CB4 4GW

**Description** Film-coated, capsule shaped, biconvex, scored tablets marked "1r" on the left and "10" or "20" on the right, each containing morphine sulphate 10mg (blue) or 20mg (pink).

**Uses** Relief of acute and chronic severe pain.

**Dosage** Every four hours. **Adults and children over 12 years:** normally 10mg to start; depending on severity of pain and patient history, increase using 10mg and 20mg tablets alone or in combination (see Data Sheet).

**Children 6-12 years:** 5mg-10mg 3-5 years: 5mg  
**Issued** November 1990

# Kelly fits the bill for the PAGB

## C&D meets Sheila Kelly the new executive director of the Proprietary Association of Great Britain

For 20 years John Wells ran the Proprietary Association of Great Britain. Replacing such a high profile figure cannot be easy, but when Mr Wells had to step down earlier this year through ill health, PAGB had no hesitation in appointing Sheila Kelly, its secretary for five years, as executive director.

Mrs Kelly's experience and personality — she comes across as friendly, but firm and authoritative — provide a sound background for leading an association which boasts in membership virtually every manufacturer producing OTC medicines in the UK today.

As secretary — the "paper crunching" job of PAGB — she has been heavily involved in the key regulatory and legal negotiations. Prior to joining PAGB Sheila Kelly was, for five years, a principal pharmacist at the Department of Health, assessing abridged product licences and reviewing licences of right; undoubtedly useful experience for a job which involves plenty of dialogue with the Medicines Control Agency.

### Pharmacy background

While born in Portadown, co Armagh, Sheila Kelly spent most of her elder childhood in Scotland, though the accent of her birth survives to this day. After studying pharmacy at the University of Strathclyde, she completed her pre-registration year at the Royal Hospital for Sick Children in Glasgow in 1972.

It was during a spell with Glaxo, where she also worked in product development on steroids — Dermovate scalp application and Eumovate, she recalls — that she met product registration for the first time. She has also experienced pharmacy at the sharp end during three years locum work in Scotland and London.

European issues dominate much of the PAGB's work. Sheila Kelly was heavily involved in the production of the pan-European association of associations, AESGP proposed framework for

medicines licensing, the "Passport to Europe" unveiled in Geneva in 1988 at its annual meeting.

Ms Kelly says that two years on, two of the "passport's" three main thrusts — on the need for an agreed legal classification, and on the provision of consumer information — have been taken up by the European Commission. Progress on perhaps the most fundamental, mutual recognition of registration, is, however, proving a little more elusive.

### European POM list averted?

In 1986, the Commission opted for one legal status across Europe for all ingredients, and a Council of Europe POM list appeared to offer a simple route to such a list. In stepped PAGB. "We looked at what might happen if they tried to produce a European POM list," Sheila Kelly says. "Things like ibuprofen, sympathomimetics and antihistamines were still POMs in a number of countries, often because they hadn't got such well-developed OTC markets, with many items still being reimbursed on prescription. If they had looked at lists and added up the votes, there were going to be great restrictions put on some UK products."

The "Passport to Europe" suggests regulatory authorities should have criteria on which the legal status of a medicine is judged. "We found there were no criteria; other countries didn't have them, we didn't have them either. We lobbied hard for criteria to be established first, and the Commission Directive on Legal Status now reflects this need."

The PAGB and wider AESGP comments on information for consumers has partly revised the Commission's early thinking on this subject too, but Ms Kelly says there is still some way to go before the Association can be completely happy with the outcome.

"When the first draft Directive was produced, everyone was saying consumers needed more information about medicines, but in countries where leaflets were produced, like Germany, consumers were faced with Data Sheets. We thought consumers should have information in a language they



understand, a view now included by the Commission in later drafts."

One major problem remains. The draft Directive on Consumer Information as it stands would require less information on outer pack labels than we are used to in the UK. Among its requirements it includes product name, active ingredients, inactive ingredients, presentation and amount, method of administration, a warning to children, an expiry date, special storage or disposal precautions, manufacturer's details, marketing authorisation number and a batch number.

The Directive treats POM and non-prescription medicines equally, but PAGB's view is that while such requirements are sufficient for POM packs, non-prescription medicine packs should carry advice on what the product is for, how much to take, and when to take and when not to take, as a very minimum. The Association stresses that pack

information is crucial for responsible self-medication. Indeed, in the UK consumers expect to find such information on medicines. Ms Kelly is hopeful that the Commission will come round to PAGB's way of thinking.

### Producing a "Passport" to trade in OTCs

This leaves registration. AESGP envisaged a form of mutual recognition in which a product receiving a full authorisation in one member state is approved by other EC authorities on presentation of a "summary of product characteristics" and appropriate packaging — the "passport". "The Commission has come up with a proposal to do just that — you get an authorisation in one country, send it to another and they have 60 days to agree," Ms Kelly says.

Closer examination reveals the problems that stand in the way of this, on the face of it, simple and

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# PILLS

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## "EVERYBODY IS TALKING ABOUT YOUR SYSTEM"

*said Gay Williams  
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the system for 18 months*

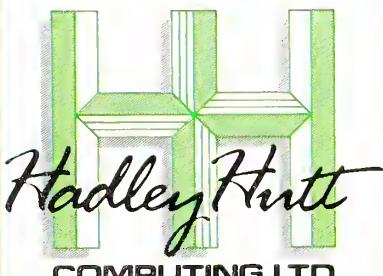
"Recently a manufacturer recalled some packs labelled Atenolol 50mg because they actually contained Atenolol 100mg. Within a few seconds I was able to list all patients who had this."

Mrs Williams finds that PILLS enables her to order with accuracy using the systems stock control and of course like the leaflets: "Pharmacists should be responsible for patient information because their information is unbiased".

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logical approach. "Many ingredients are treated differently by different countries," Ms Kelly explains. "In the UK we allow a three tablet dose of aspirin, in Ireland they only allow two. We need to get authorities to deal with products in a similar way.

"We intend to produce standard summaries of product characteristics for all common ingredients, so the principle of having your product registration accepted will work in practice."

Ms Kelly admits this is a major project for the industry across Europe to take on, especially with 12 countries involved, but the will to succeed is there.

### No race to UK market by Euro-packs post-1992

It is unlikely any new system will be overburdened with work immediately the EEC's internal market is open for business. Sheila Kelly, for one, does not think there is going to be a "big bang" come January 1, 1993.

"OTC business is still based around national registrations with few Euro-brands, mainly because different countries have different preferences for medicines. The OTC internal market will grow, but only as people become more alike, and Euro-brands develop from national products," she suggests.

However, Ms Kelly does expect companies operating in countries that are alike (UK, Eire) or have common languages (France, Belgium) to increasingly adopt common cross-frontier policies, moves which can only be helped by satellite broadcasting.

PAGB is at the forefront of European developments. As one of the largest proprietary manufacturers association in Europe, and therefore with the largest staff, PAGB, with its German equivalent, shoulders much of European workload of the AESGP.

A high profile inside Europe might appear at odds with a UK Government which often appears a reluctant participant in things European. Ms Kelly dismisses such juxtaposition as pure politics. "Mrs Thatcher may say politically she will only join as and when things are right, but behind the scenes all the trade associations and Government bodies are working furiously to get things right. The Medicines Control Agency wants what we want; it's very much a partnership."

### Advertising remains PAGB's 'staff of life'

While Europe will occupy much of Ms Kelly's time as she settles in to her new job, the bread and butter work of the Association

## C&D INTERVIEW

since its formation in 1919 has been advertising control. "Our pre-publication vetting of advertising is our unique selling point and makes us different from all other trading associations," Ms Kelly says. "It's the reason our members join and it's the activity all others flow from.

For manufacturers, the setting up of such a system over 70 years ago has proved invaluable. The Medicines Act 1968 includes a clause which would give the power to vet advertising to a statutory body — now the Medicines Control Agency. The clause has never been enacted, and Sheila Kelly points to the self-regulatory success of the PAGB Code as the reason why.

"In the 15 years since the Advertising Standards Association was created, only eight complaints about medicine advertising have been upheld out of 90,000 complaints received about all advertising. And we get every assurance from the MCA that they think we do the job well."

### Brussels shows interest in advertising rules too

Even in advertising, however, the spectre of Euro-legislation is not far away, though there seems little likelihood that the PAGB's pre-vetting system will be upset by any new Directives. While early drafts of the Directive on Pharmaceutical Advertising would have required pre-vetting by a statutory body, the final version now going through the system confines itself to setting a framework for control, leaving individual Member States to compose their own system.

The Commission also appears to have decided against having detailed product information included in advertising. PAGB itself produced research showing that when too many detailed messages are crowded into advertising there is a danger that few, if any, are communicated effectively.

Ms Kelly thinks the Commission chose such a line because at the time of drafting, the Germans were experimenting with information-loaded commercials. The Germans have since dropped the ads as unworkable; the Commission is very likely to follow suit.

As a spin-off from its advertising work, PAGB effectively defined self-medication. When the Medicines Act was being drafted in the late '60s, it picked up from the PAGB Code the indications suitable for self-medication.

PAGB now sees itself used as a sounding board by both manufacturers and licensing authority. "Companies come to

us when they are planning a product to find out whether we would find an indication claim suitable, how the environment for a product looks now and what it might be like in two years time when they are applying for a licence." Sheila Kelly says.

### Research role to continue

Such crystal ball-gazing often prompts PAGB to carry out fundamental research into the use of OTC medicines. Recent surveys and reports have covered medicines and child safety (based around design guidelines for strip and blister packs), a study of the extent of self-medication in Great Britain, and a consumer study of TV advertising, to name but three.

"We look at the issues industry is going to be facing in the years ahead. With the continuing pattern of legislation, to make a case for something you need facts to back it up," Ms Kelly says. But she is giving no clues as to the areas PAGB is currently working in. "We have several things on the go, and we certainly don't keep it locked in a cupboard when we have something to say," she adds.

### No great change in style

Sheila Kelly says it's business as usual at PAGB, despite the personnel change. "Everybody says PAGB is the best trade association in the country and I certainly won't be making great changes just to show I'm here."

During John Wells' stewardship of PAGB, the number of staff members rose from three to 13 as the scope of the Association broadened. "PAGB will adapt as the work adapts. The way we do things now is very successful and I don't think there will be any dramatic changes," Ms Kelly promises.

She admits she has a tough act to follow. To many, John Wells was the PAGB. "John was director of PAGB for 20 years and had been with the Association for 10 years before that. He is so well known throughout the industry," she says.

While there had been talk on Ms Kelly's appointment of eventual succession as executive director, it was only when she took over the role in difficult circumstances, that she realised how much her predecessor had actually prepared her for the job.

"But right from my beginning with PAGB he made sure I've been involved in everything PAGB does. He certainly seemed to set out to train me. He was a very generous boss in that respect. I've had five months filling the gap and I'm just beginning to realise how much of the job I was already doing."



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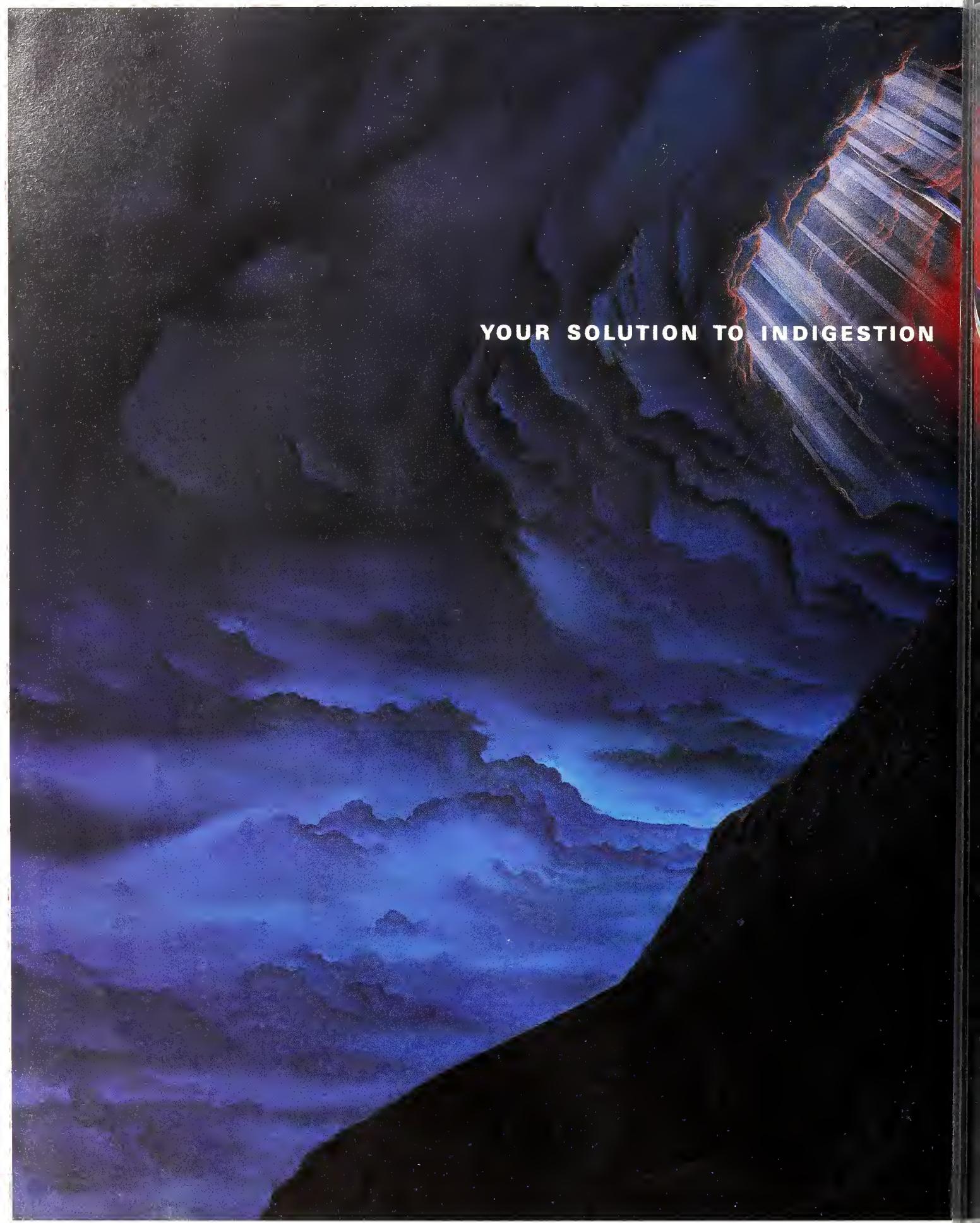
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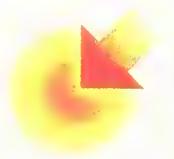
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RADIATES RELIEF

If the National Pharmaceutical Association's legal executive Glyn Walduck cannot help you with a matter of law that you become embroiled in, you can be sure he knows a man who can. *C&D* interviews the man behind the Chemists' Defence Association

The chances are that if you dispense Tegretol instead of Tagamet, or someone slips and breaks a leg in your pharmacy, you will be on the phone to Glyn Walduck.

Mr Walduck administers the Chemists' Defence Association; NPA director Tim Astill is the general manager. The CDA's main objective is to protect the trading and legal interests of NPA members; part of its remit is to provide professional indemnity cover and legal defence against prosecution.

A lot of the time, Mr Walduck is dealing with members' queries; legal — both personal and business — remuneration, and employment. He can spend more than 25 per cent of his working week on the telephone; he can also often be seen using his dictating machine.

Prior to joining the NPA in May 1988 from British Rail's legal department, Mr Walduck had had no experience of pharmacy law and ethics. He has picked up a lot on the job, but does not pretend to know all the answers. Mr Walduck has no qualms about referring a query to Mr Astill, who has a law degree, or to other back up services which include solicitors in various parts of the country, and employment consultants.

Employment queries can be referred in-house to personnel manager Valda Elson and computer manager Fran Brown, or if Industrial Tribunal proceedings are instigated against members, they are dealt with by employment specialists. Mr Walduck handles some himself: "My work at British Rail on Industrial Tribunals has stood me in good stead, although here, of course, it's one man and his assistants and not a large corporation."

He worked at BR for 12 years, joining them as a law clerk. During his time there he did the Institute of Legal Executives associate examinations; he now has one more exam to pass before qualifying as a Fellow of the Institute.

At BR Mr Walduck had a substantial case load, dealing with High Court and County Court actions brought forward by members of the public and staff — mainly personal injury claims. He also handled actions involving breaches of contract and landlord and tenant disputes. Usually his work was all post-writ — after proceedings had been issued.

"At the NPA it's all pre-writ; so if a claim is instigated by a third party, we deal with it from the outset. It's more like a claims department," says Mr Walduck. When there is likely to be an issue on liability, he instructs one of the NPA's solicitors to handle the case.

### Paying out

"A lot of the time the claim can be dealt with here, for example for a dispensing error where there is no issue over liability — a mistake has been made. We would ask for a medical report to determine the harm done, and settle the claim," he explains.

If a claimant issues proceedings against a

# The 'law' man



member, the solicitors get briefed. "We then become their client, and they must report to us. If an offer is to be made, they must come back to us and ask for authority to make it," he says.

The CDA indemnifies all NPA members against liability to pay compensation, and on rare occasions, claims have been settled into

the hundreds of thousands of pounds.

"In the main, it is cheaper to kill than to maim," he states. The sorts of cases that cost money, he explains, are where hypoglycaemic drugs are given to non-diabetics, who then become comatose and suffer brain damage. An award has to cover their maintenance as well as to compensate for loss of employment, quality of life, etc, because their life expectancy is not affected.

The good news is that the number of claims made for damages as a result of dispensing errors are "few and far between" considering the millions of prescriptions dispensed each year, says Mr Walduck. But he realises that many cases do not get as far as him: "If the patient spots a mistake, and returns to the pharmacist who handles the situation well, they might be prepared to let it go and not pursue the matter."

He warns, however, that members of the public are becoming more claims conscious. Even if no one has been hurt, it is not uncommon for people to try to claim compensation for "psychological damage", he says.

But things are unlikely to get as bad as in America. "In the English system you get compensated to try and put you in the position you were in before the accident," Mr Walduck explains.

### Accidents will happen

Mr Walduck acknowledges that anyone can make a mistake; if there is an human element involved in anything then there is the potential for a mistake, he believes. "Presumably, the more prescriptions you dispense, the greater the likelihood of a mistake being made. It must be like driving; the more you do the more likely you are to have an accident."

So far so good. What about his views on pharmacists? "By and large pharmacists are very pleasant. They do care about other people; the vast majority are genuinely sorry, very upset and very anxious about their mistakes," Mr Walduck opines.

Has his job put him off getting a prescription dispensed in a pharmacy? "You don't think, when you take a prescription in, that you may end up a cabbage. It doesn't occur to you, and it shouldn't because the likelihood of it happening is so remote," he says. "But I would look at the label and the contents to make sure I'd got what I was supposed to," he laughs.

It would appear, then, that despite his job Mr Walduck is not "down" on pharmacists. But don't get complacent. Mr Walduck feels that complacency, perhaps unwittingly so, may be the reason why some pharmacists come to the CDA in the first place.

So what advice can he offer on avoiding mistakes? "Pharmacists have it instilled into them to check and double check. I don't think there's anything you can add to that," he says. The paradox is that those few mistakes help to keep him in a job.



**Planning restrictions make flights of fancy in pharmacy design a remote possibility in the UK, yet the incremental nature of the development of British pharmacy design has produced some significant developments over the years. C&D talks to some of the people in the thick of contemporary pharmacy shopfitting**

# Checking out the trends

Unlike the more fashion driven areas of retailing, developments in shopfitting tend to be gradual rather than radical, at least in the UK. Fantastic architect-designed pharmacies like the one above in Boves, France, are very much the province of our European neighbours.

In part this is because European pharmacies have traditionally stuck to their core business of dispensing medicines, and in part because they are less hamstrung by the need for front shop display space.

Income plays its part, too: a modern, architect designed building like the one illustrated is likely to be a significant investment, but in many Continental countries pharmacists can expect to earn as much as three times their UK counterparts for dispensing prescriptions. In addition, they are also free to go into partnership with non-pharmacists, which can assist cash flow.

Nevertheless, it may also be true to say that UK taste is conservative when it comes to retail outlet design, preferring incremental development of traditional ideas.

However, whatever the current fashion in shopfitting may be for pharmacies, there are some universal criteria which should underpin any layout.

First and foremost, both the pharmacist and his or her customers should feel compatible. This may seem self-evident, but the radical restructuring of a traditional pharmacy by an over ambitious owner can

be a quick way to lose your regulars.

Ray Todd, head of pharmacy planning at the NPA, puts it this way: "When I am called out on a consultation I sometimes have to damp down over enthusiastic pharmacists; if they go overboard on quality customers can be put off. In these cases I recommend they pick a system which upgrades their present image without going over the top."

## Avoiding blindspots

"The exception to this is where the population has changed substantially since the last time the shop had a refit. Docklands provided an example of this: a pharmacy there had been in an area of back-to-back housing; now most of the customers are yuppies — it means a major re-think for the pharmacist. Generally though, where the population is static it is best just to go up a notch."

Mr Todd argues that shop layouts need to take into account the age groups using the shop. He also emphasises the need to keep security in mind — creating blind spots in an easy pitfall.

He travels around 55,000 miles a year on NPA consultancy work, and perhaps surprisingly, says there are a few parts of the UK where it is still taboo to shoplift, in remote parts of Scotland, Devon and Cornwall. "It just illustrates that what is good for one pharmacy is not necessarily going to be good for another," he says.

"There is a danger of including gimmicks in pharmacy design; these can be effective in certain situations but they won't

necessarily work for everyone.

"One useful rule of thumb is that the narrower the aisles the less feasible it is for the shopper to examine the lower shelves; in my view, drink bottles and nappies are the only thing you can get away with being down at floor level."

In the main, shelving should be 6-8ins from the floor, as this is both convenient for the shopper and it leaves sufficient room for wiring, heating, and other essential services.

With pharmacy design, the important thing currently is for the shop to help put over the professional image of the pharmacist. The services provided should be immediately apparent to the customer when entering the store, but the design should also allow for such features as a counselling point, patient medical records, and perhaps continental draw systems for the high density storage of pharmaceuticals.

Pharmacy storefitters Zaf Ltd contend that both independent pharmacy outlets and multiple chemist groups alike are increasingly adopting a "Community Chemist" approach, and are putting greater emphasis on their role as dispensing pharmacists without losing sight of their dual role of convenience retailer. This is inevitably putting greater pressure on the often very limited space available in a pharmacy, and Zaf argue that effective space utilisation has become a key factor in planning the layout of a modern pharmacy.

The company says that two major considerations have contributed to the space problem: the first is the NPA's efforts to improve the ethical profile of its

*This week's covershot shows Scott's new East Kilbride pharmacy by Dollar Rae*

*Pic (left) courtesy of Ian Richie Architects. Pharmacy at Boves, France*

members by promoting increased ethical activity and the introduction of OPI packaging. The second consideration is that modern retailing practice and consumer demand are putting pharmacists under pressure to provide a wider range of products.

Among general, rather than pharmacy specialist shopfitters, the trend appears to be towards offering the retailer a complete design package, from design through to completed refit. DDS — Design Display Shopfitters — take this approach, and so do Royals of London. Both take the view that there is a wealth of design experience among UK consultants but that companies often stumble when it comes to the practicalities. Royals take a particularly strong line: "Certain retail design practices have been abusing their responsibilities and making dreams for themselves," said a Royals spokesman. The company also sees a return to traditional pharmacies "rather than gift shops," and regards a "natural

The pharmacy should also have adequate workstations for the preparation of prescriptions and dosages for nursing homes and similar institutions; similarly, there should be a sensible arrangement for unpacking and checking goods inwards.

For this Ray Todd prescribes a properly designated area of a workbench for the reception of goods inwards, where the shop's assistants can check each delivery and decide whether an item goes to the shop, the dispensary or into store.

In a pharmacy it pays to make a proper feature of specialist product lines such as photography and perfumery.

That aside, the emphasis should be more on dispensary activity than the shop's OTC goods, "because that is where the pressures are, currently".

Mr Todd is not a friend of the traditional straight counter, which he describes as "confrontational".

"A straight counter seems to say 'this is my territory', to the customer, and is also often the cause of a congregation of people waiting for scripts to be filled; however, if it is angled the customers step back as the

next one comes in and begin circulating around the shop."

In the main he is against window displays. "Traditionally, shop window displays were a means of sending a message when people were window shopping at night. Now people want to look into a shop and see how many people are in there. It is a short term view to take the attitude that once you have the customer in the shop you have achieved your objective. They may wait for four or five others to be served first a couple of times, but if they can't see in the shop to check they may well assume the place is busy and go elsewhere."

He recommends making better use of the ends of windows, to catch the eye of people walking by the shop: "Make them stop and look into the shop," says Mr Todd. He also says clear windows are better for security — you are less vulnerable to robbery if passers-by can see what is happening.

Zaf's marketing manager Paul Ellerton comments: "The progressive customer oriented pharmacist now places a far higher priority on their perceived high street image, the overall internal appearance and layout of their premises and effective presentation of an ever increasing range of merchandise as they seek sales potential."

Lighting has not changed radically in recent years; the real choice is between an integrated system with panels inset into the ceiling to provide a sophisticated effect, and standard diffusers, for secondary lighting. Spots would appear to be on the way out and are being replaced by low voltage highlighting for specific areas.

One less positive trend in shopfitting has been the rate at which shopfitting companies have been going out of business over the past 18 months, caught by the squeeze on spending created by the prevailing sky-high interest rates. This has been a hazard for pharmacists, who are normally expected to provide one third of the cost of the refit as a deposit.

The NPA has responded to this problem with its deposit guarantee scheme, under which the traditional deposit is paid to the NPA instead of the shopfitter. The NPA then holds it in trust until work begins; a necessary service with the current numbers of shopfitters going under, says Mr Todd.



*Zaf's continental drawer system*

reticence as being part and parcel of the pharmacy business.

Design Systems International are a relatively new design consultancy, just two years old as a company, and do much of their work in Germany. Director Lee Adam sees a greater influence of design on shopfitting generally, but not the same emphasis on architectural design found in Europe. "In the UK we concentrate on merchandising systems," said Mr Adam.

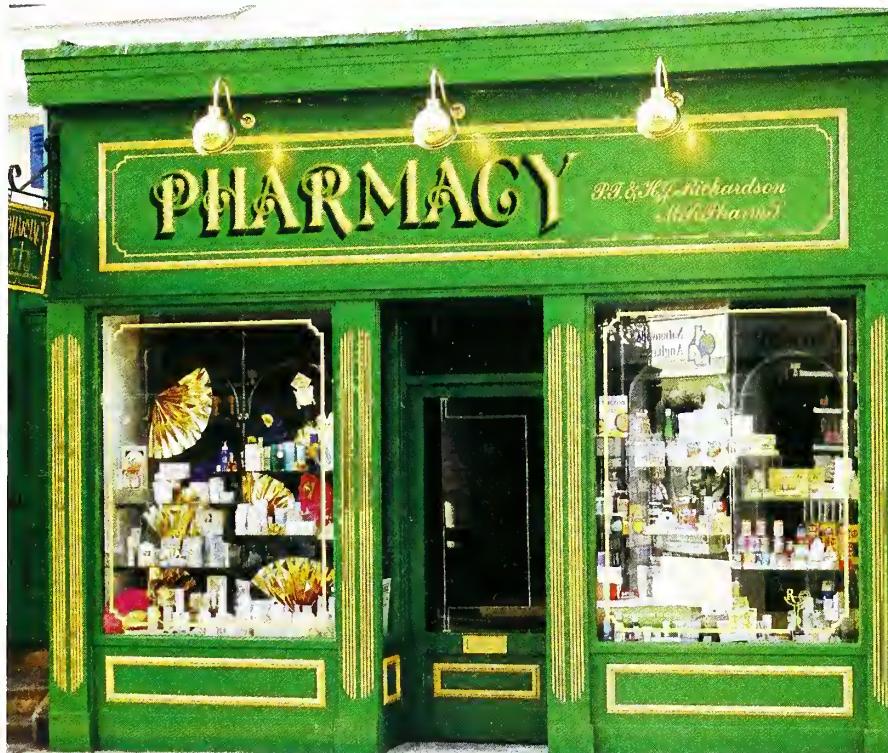
Counselling points are a practical compromise Mr Todd has been suggesting to pharmacists in response to the Nuffield Report's recommendation of counselling areas. A counselling point goes much of the way to meet the need without depriving the pharmacist of valuable selling space.



*A raised level dispensary specified by Zaf for the Craven Pharmacy*

# Richardsons go it alone

In the current economic climate many pharmacists are trying to balance the need for a refit with the high cost of money, and the result has been a buoyant market for partial refits. *C&D* looks at Yorkshire pharmacy P.T. & H.J. Richardson as a successful example of this sub-section of the shopfitter's craft, which it showed by winning the partial refit category in the *C&D/Whitehall Laboratories* shop design awards competition earlier this year



Richardsons transformed their pharmacy without going to shopfitters

When P.T. & H.J. Richardson opted for a partial refit for their Filey pharmacy it did not mean they lacked vision — far from it. From the beginning they set their sights high, aiming to "reach out and grab attention and invite inspection" from the public.

The pharmacy is sited in a secondary shopping street in the small seaside town of Filey, North Yorkshire. As one might expect, trade is seasonal with a five-fold increase in the Summer months. Perhaps less expected though, is that the habit of window shopping in the evenings is still very popular in Filey.

The Richardsons decided that the shopfront was where the money most needed to be spent, and they carefully ordered their priorities before consulting shopfitters. Healthcare should be indicated, together with a high level of service, they decided. In addition, they also wanted to provide an attractive and practical display for the town's evening browsers to enjoy. Finally, they were looking for easy and inviting access to their premises.

A dispassionate observer would almost certainly say they had their fundamental priorities right; the existing street elevation was outdated, faded and unattractive — unlikely to attract any but the most loyal or urgent business.

So far so conventional; but then the Richardsons made an unexpected decision: they decided to reject the multitudinous

professional shopfitting solutions available these days and go it alone, using local labour and co-ordinating the project themselves.

To maximise use of space they decided the new shopfront should be flush with the street and the door in a central position. Storage cupboards with sliding doors were specified above and below the window area. Significantly, too, the Richardsons decided to make the "emotive" change from the name chemist to pharmacy.

## Period style

Local architect Malcolm Stather drew up plans for a period-style pharmacy from the Richardsons' rough designs.

In just three weeks the transformation was complete. High quality brass lamps from local supplier Houghton & Stone, hand painted signs from Terry Tapley at Scarborough and decoration, including gold leaf work, from another local artisan Les Moore & Co. The gold leaf was an important feature for the Richardsons — they felt it reinforced the idea of service to the community.

One of the many attractive features of the shops is that the door hinges are designed to open through 180 degrees, so that during the Summer months the door stands back to the window, inviting customers to enter. The Richardsons say they were following the experience of a colleague when they decided to go it alone, but at the end of the day it has been their own success.



The Richardson frontage before the partial refit

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# Making the best of it

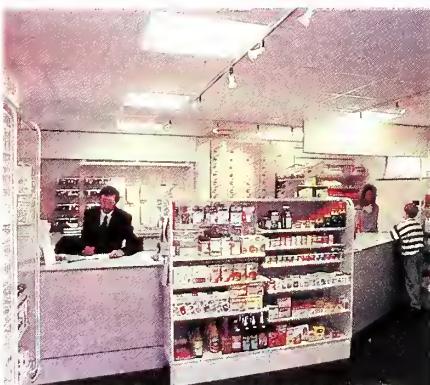
**Shopfitting has many of the characteristics of architecture: it is about finding a unique solution to the problems set by a particular building within the available financial parameters, and like architecture, design has become an increasingly prominent aspect of the work. C&D looks at some recent case histories and the solutions created by the shopfitters consulted**

When Norman Rapson acquired Reappage Ltd, a Vantage chemist in Weston-super-Mare, a little over eight years ago he embarked on a schedule of improvements to maximise the trading performance.

The three-stage refit, by BFN Showrax, has been designed to fully exploit the shop's locality within a major shopping precinct where the pharmacy's turnover is made up of 73 per cent counter sales and 27 per cent prescriptions.

The layout of the shop aims to take full advantage of the passing trade of 30,000 customers a week visiting a nearby Sainsbury. To this end, the shopfitting programme has concentrated on improving the overall retail ambience: additional shopfittings, a new suspended ceiling, carpet tiles, imaginative lighting, a soft colour scheme and background music have all combined to attract some 3,500 customers a week to the business.

To improve the shop's strongest performers four principal departments have been singled out: infant care and clothing; hair care; fragrances; and the dispensary. These areas have been sited in the four corners of the premises with an open plan dispensary at the rear, an arrangement designed to encourage a circular traffic flow and so ensure that the majority of the sales floor is "shopped" by customers. Prescription business is said to have increased by 20 per cent since the introduction of the open-plan dispensary.



Sintek say the pharmacist is the expert

## Rotherham refit

Sintek specialise in the development and supply of pharmacy storage, handling and workstation systems. The company is currently aiming to increase its presence within the community pharmacy sector, and recently became involved in the refit of a pharmacy in Rotherham. Mr Moore of the Ravenfield pharmacy made the decision that he wanted to be "as patient orientated as possible". Sintek's approach to planning and design of the pharmacy environment is that, in the design stage, it is the



BFN Showrax opted for an open plan dispensary layout for Reappage

pharmacist who is the expert in what is required in terms of merchandising strategy and work operations, while the company's role is to act as a partner in the design process.

The upshot of this particular partnership has been to site the pharmacist at a counter which is both his workstation and a counselling point. Patient medication records have also been located on this counter, with a VDU which can be rotated to allow patients to see their own records, a feature intended to strengthen patient-pharmacist dialogue and provide a natural opportunity to give information.

This arrangement allows Mr Moore to work primarily with prescription assessment and patient counselling while delegating the routine manipulative activities such as dispensing to the pharmacy technician.

This has made it important that drug storage is ordered and logical, and the company's Rombic drawers have been specified to provide compact storage facilities and clear stock separation.

Under the counter space utilises Sintek's Stockflow shelf and drawer components fitted throughout the retail and dispensary areas, allowing Mr Moore to keep his counter clear.

## Spinning success

In Salisbury local residents and the local MP asked CD Chemists to open a dispensary to serve the villages to the east of Salisbury, and the result is the Winterslow Pharmacy. Mrs Williams, a director of CD Chemists, had seen rotary devices used effectively to save space in dispensaries in Hungary, and so turned to Rotary Space Creators to turn the trick in CD's existing 18 by 18ft drugstore at Winterslow.

The outcome has been 130 linear feet for the dispensary items in just ten feet of wall area. There was still room in these very compact business premises for a sink, a computer and a workbench — and space for two staff. With only half the original area available for front shop items more than 80 per cent of the original product lines are still displayed on the two Rotary Space Creators in the shop.

At CD Chemist's primary business in Salisbury High Street a quadrupling of the rent to £84,000 led them to relocate 100 yds up the road. However, it meant moving from a 1,200sq ft town centre shop to one of just 370sq ft. This time, working closely with Steve Marvin from Rotary Distributors VME, they used nine Rotaries in the public display area to achieve 695 running feet of product space and added 70sq ft of pegboard hanging space — actually more than in their previous premises.

The use of the Rotaries has made it possible to leave the centre of the shop entirely unobstructed, as the product facing space has been achieved by zig-zagging the wall-shelving in and out and using integrally fitted Rotaries.

## Built from scratch

A very different problem was presented to Dollar Rae, one of the well-known names in pharmacy shopfitting, who have recently refitted the two new acquisitions of the Scott Chemist chain, centred at Larkhall.

Both the new units were 2,000sq ft shells, located in the new indoor shopping centre at East Kilbride and the Parkhead area of Glasgow. Such bare buildings are a relative rarity in community pharmacy shopfitting and present their own challenges.



Dollar Rae went ultra-modern for Scott's Parkhead pharmacy

At the East Kilbride site, although it is still a relatively new town with a young population, the design choice was to go back in history and produce a design strongly influenced by Art Nouveau.

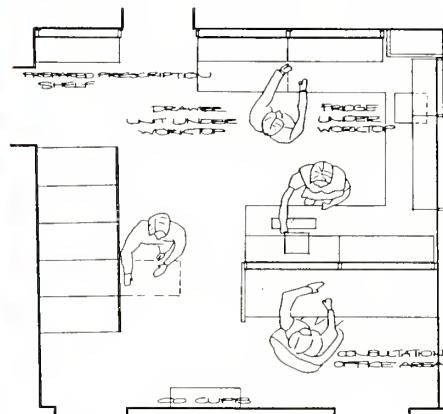
Within the overall concept, Dollar Rae's brief was to use space economically and to the best effect — and the company used its own specialist range of pharmacy furniture to provide well-lit gondolas, display

showcases and counters, a rapid-turn-round photo laboratory, and special areas for jewellery, gifts and other non-pharmaceutical lines. Strong emphasis has also been given the huge range of perfumes.

The east end of Glasgow poses a completely different set of questions, and the pharmacy is located in a strikingly modern indoor complex built on the site of a former steelworks.

This time Dollar Rae decided the pharmacy had to be up-to-the-minute in every respect. They have made use of contemporary lighting to emphasise the store's bright pastel colours livery. The pharmacy is reported to have been successful from the day it opened its doors.

It is well known that many community pharmacies are refitted using schemes promoted by wholesalers, and a prominent Doncaster pharmacy took that route when they contact Planova through the Unichem scheme.



Planova offer free planning

Historically the pharmacy has established a healthy trade, but the retail business has suffered from space restriction and poor layout. The result was poor customer circulation within the sales area and negligible stockturn from over half the stock displayed. Clearly, the challenge was



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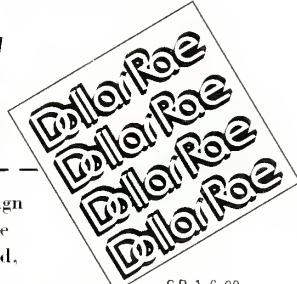
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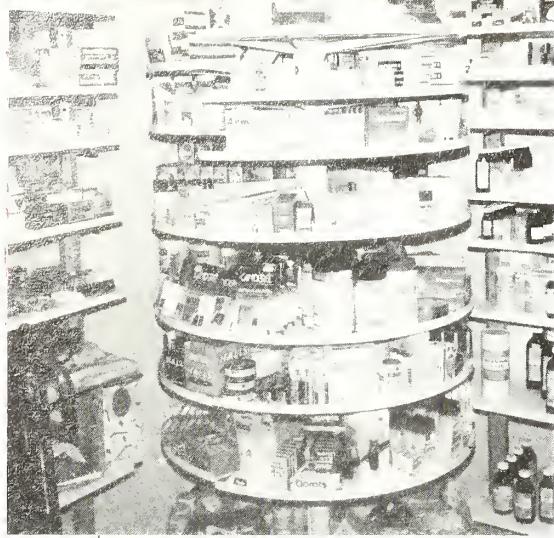
Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Send to: Dollar Rae, 47 Hagg Road, Glasgow G41 4AR.





A Rotary Space Creator

to improve customer flow, make better use of the available space and provide an enhanced presentation of merchandise.

A key decision was to remove a rear internal wall and staircase, increasing the available floorspace by 60 per cent. Near the back of the pharmacy there is now a tiered medical display counter plus eye level display of P medicines on shelving to the rear and an overhead "prescriptions" sign. It is visible to customers as they enter and its purpose is to act as a visual magnet, drawing the customers through the selling area. There is a customer seating area near the prescription counter with a full range of medical lines displayed in the surrounding area.

The prescription counter was planned to offer convenient staff access to a redesigned dispensary which had previously suffered from acute congestion. This problem has been overcome through the installation of five, 14 draw bays of Planova's Continental style medicine management and control system. Extensive work surfaces, shelving for prepared prescriptions, a temperature controlled cabinet and a sink have all been re-sited in the dispensary, creating space for a consultation area.

The general sales area has been planned to include wall display units together with a central feature gondola presenting a full range of haircare products and accessories, health foods and vitamins, cosmetics, toiletries, photographic accessories, hardware lines and pet foods. Baby products have their own section.

### Flexible presentation

A new name to shopfitting, the presentation and display division of PD Design Co has recently carried out a project for male toiletries manufacturer Shulton who were looking for a more flexible way to present products at the point of sale. The main problem to overcome was product overcrowding on shelves coupled with poor brand identity opportunities. PD's answer to the problems has been to produce a flexible merchandising system called Spaceflex, designed to fit any shelf configuration and co-ordinate the brands to create a neat and attractive presentation.

Two Anglia Regional Co-operative Society pharmacies in Peterborough have received new retail and dispensary systems from Barshop displays Ltd. The Millfield pharmacy is combined with an opticians while the Westgate House outlet form part of a department store.

## SHOPFITTING

# An alphabetical guide to shopfitting services

**Shopfitting is an ever expanding and constantly diversifying market, and to complicate matters further it characteristically has a high number of new entrants — and receiverships. In an attempt to impose some order in a traditionally freebooting activity, C&D looks at the current players in pharmacy and the services they offer.**

**Abbot Products (0621 772248)** Have extended their range of Pegwall retail display accessories suitable for use with slatted wall panel systems; the company also markets the Pegwall system itself, which has been extended with a series of jumbo sized panels. The company is also a source of slimline gondolas and acrylic shelves.

**Anaco (051-647 5831)** Shopfront specialists. Offers almost any practical design in virtually any colour.

**Arun Medical (0273 517618)** Represents E Plan in the hospital market, acting as agent for their range of dispensary and pharmacy furniture. Retail and community outlets will continue to be dealt with by E Plan (0273 517711) directly.

**Avery Myers (021-552 3322)** Are marketing a three sided literature stand providing from 18 to 27 pockets.

**Barshop Displays (0733 310555)** Retail store equipment specialists who have recently started a new consultancy division. Markets the Astore range of modular storefittings which includes a series of 2m long timber-based dispensary modules.

**BFN Storefitters (0474 560671)** Markets a new modular shopfitting system consisting of uprights, feet, shelves and backsheets plus a range of counters and display units. Its Showrax subsidiary specialises in designing and equipping pharmacies.

**City Design (0455 250550)** Have a new range of modular counters, corner units and till points based on standard modules with coated metal frame supports.

**Cotswold County (0386 700446)** Offers a bespoke shopfitting service and specialises in shelving, furniture and storage systems. Characterised by an installation method where units arrive on site fully made up to drastically reduce fitting time.

**Design Systems International (0533 460700)** Shopfitting designers and specialist joinery manufacturer.

**Dollar Rae (041-649 9331)** Well established pharmacy shopfitters capable of designing and fitting a pharmacy from scratch using its specialist range of pharmacy furniture of its own manufacture.

**Europa Shopfitting and Design (0442 3412)** Recently launched a low cost redesign and refurbishment service as an alternative to a full refit. The company will redesign retail outlets cosmetically treating the fixtures with new colours, trims, back panels or integrated lighting, then re-install them.

**Fairfield Displays (0252 812211)** Are promoting creative window displays, low-voltage lighting, the 007 range of showcases and counters. The company offers a full installation service.

**H+H System (0742 756642)** Offers an Australian devised shelving, drawers and dividers system plus medical refrigerators. The range features a combined drawer block with pull out stock shelves.

**Kawneer UK (0928 563732)** Shopfront framing systems. Features the company's slimline 300 system and an overhead concealed door closer.

**Lazawood (0883 622151)** Formerly known as Triton; markets a joinery based dispensary system range comprising seven standard bench modules, full height wall shelving and two heights of over bench shelving.

**Letraset Sign Systems (0438 743434)** Have introduced Instant Frame aluminium framing as an addition to their Stax.i sign system.

**PD Design System (0533 810018)** Have recently launched a presentation and display division as part of internal restructuring. Over the past ten year PD Design system have added interior design to its core merchandising and display concepts business.

**Planova (0602 299456)** Modular system shopfitters whose fittings include continental style medicine management and control systems. Capable of seeing a project through from initial discussion and survey to installation. Sister company of Zaf.

**Rotary Space Creators (0772 617744)** Provide high-density rotating display stands and a wall shelving system. The company offers planning assistance with computer aided floor plans and 3D pictures.

**Royals of London (081-766 6199)** General shopfitters with strength in project management.

**Sintek (0533 530818)** Specialists in the development and supply of pharmacy storage, handling and workstation systems. Markets the Sintek Rombic drawer system.

**Sloane Marketing & Design (0933 401555)** Are marketing a new range of display aids from Alrec including Lightmaster lightboxes, the Presenter modular leaflet holder and the Alshelf shelving system.

**Zaf (0602 780808)** Shopfitters with extensive experience in the pharmacy sector. Offers modular shopfitting system with various finishes, continental style drawer system. Sister company of Planova.

## Frugal way to business entré

At the recent Institute of Pharmacy Management conference we listened with interest to various financial ideas for the would-be proprietor pharmacist (C&D last week, p796) — how to borrow to buy! May I urge the advantages of accumulating capital by restraint for a few years after joining the Register?

With current salaries the newly qualified should be able to save a few thousand pounds a year. And £1,000 even in a building society, would double itself in about seven years at 10 per cent (tax paid) interest. With present interest rates well under seven years is required. My suggestion, old fashioned maybe, is that the young pharmacist asks him/herself: "What is the acceptable *minimum* I can live on for a few years?" and "What is the *maximum* I can save?"

I am not claiming that the entire price of an established pharmacy could be raised in this way. Goodwill values at present would almost certainly preclude

this. But the less you borrow, the more profitable any business will be for you. And the proof you have given of financial prudence will put you in good standing with a prospective lender.

The pharmacist intending to start a business from scratch should be able to build up the capital to purchase the fixtures and fittings needed. There would be no massive borrowing required to purchase goodwill. And there are many locations where a new pharmacy would serve a great public need. Stocking the business should not be a problem.

The pharmacist ready to eschew the exotic holidays, the prestige cars, the high-living, and so on, can still enjoy life! Why not substitute the solid long-term blessings for the trivial satisfactions? Later on he or she can have *both*, if that is desired!

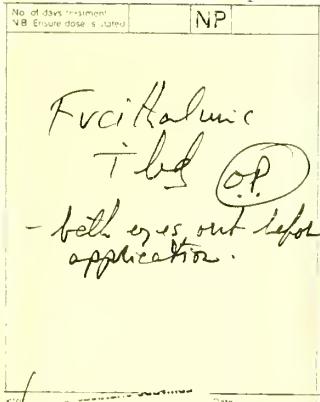
In short, a little frugal living can pay rich dividends.

Eric A. Jensen  
Brighton

stock I looked up Unichem's catalogue to order it. Lo and behold, it is not in the medical section, but is in the counter lines pink section — hence, no discount unless you happen to order £1,000 per month of OTCs, and can order in case lots, which, unfortunately, I do not do. Faced with the thought of actually loosing money on this dubious prescription, I must confess to taking the easy way out and regrettably informed the customer that we were out of stock and advised her to try elsewhere.

Is it any wonder that we pharmacists are classified as C1 (lower middle class) citizens.

J.D. Glassman  
Shoreditch, E2



*Is this GP working on the principle that the more it hurts the better it is for the patient?*

As I did not have ten bottles in

## DoH research awards

The Department of Health is inviting applications for its Pharmacy Practice Research Enterprise Scheme 1991.

Awards made under the scheme are intended to provide training in the planning, development, execution, and dissemination of pharmacy practice research in a multidisciplinary environment.

The scheme consists of two types of practice research awards — training awards and studentships. All candidates must be pharmacists, resident in England, who can demonstrate an

interest in and a commitment to the development of pharmacy practice as a discipline within the profession. They can have either applied for a course which includes a significant component of research methodology or have applied to study full-time for an MPhil or PhD with an eligible research group.

Applications should be made before March 31 1991. Further details and an application form are available from Miss A. Oni, DoH, Room 124, Portland Court, 158-176 Great Portland Street, London W1N 5TB.

## Practice studio opens

What is believed to be the first purpose built studio in the UK for teaching pharmacy students communication skills was officially opened at the Chelsea Department of Pharmacy, King's College London, on Wednesday.

The set is fitted out as the medicines counter of a pharmacy, and the shelves are merchandised with typical prescription and over-the-counter medicines. The studio, with seating for 10, is equipped with video and audio

facilities.

The studio has been set up with the aid of sponsorship from Intercare. Shopfittings were supplied Woodstyle Ltd and further financial help was provided by Fisons and Kirby Warrick.

Apart from training pharmacy undergraduates to respond to symptoms, the studio will be available for commercial hire for training sales representatives and for making advertising films, and so on.

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# Höfels

# Höfels Garlic Pearles — the British brand leaders

Natural healthcare is one of the most vigorous and fast-growing markets in the UK and sales of garlic supplements reflect this development. In just over two years, the market has grown 300 per cent and is now worth £16 million at RSP in 1990.

This growth has been fuelled by the increasing amount of published scientific and research work on the benefits of garlic, particularly in the area of cardiovascular health.

In 1987 the Department of Health recognised the validity of the traditional uses for garlic and granted Höfels traditional garlic pearles and garlic and parsley tablets full licensed product status. Höfels is the brand at the leading edge of this booming market.

## Way out front

The latest independent market research shows that Höfels sells over twice as many packs through pharmacy outlets as its nearest competitor.

## One-a-day and effective

To emphasise its standing as brand leader, Höfels has introduced striking, modern new packaging for the range.

- One-a-day dosage: Research has shown that most people prefer the convenience of the one-a-day dosage and all Höfels products are available in this popular presentation.
- Bubble packs: The entire range is now available in bubble packs for added user convenience and quality assurance in packs of 90 or 30 pearles or tablets.

## Höfels garlic 'a must'

Höfels offers a range of products covering a wide spectrum of health benefits.

- Coughs, colds and catarrh: Höfels original garlic pearles, in the green packs, is the leading natural licensed medicine for the relief of the symptoms of coughs and colds, such as catarrh and troublesome coughing.





Höfels garlic and parsley tablets, in the brown packs, provide the added benefit of parsley.

Heart and circulation: Höfels Cardiomax garlic pearls, in the red packs, targeted for heart maintenance.

General health maintenance: Höfels Neo-garlic pearls, in the grey packs, are guaranteed odourless and tasteless.

## Take heart with Cardiomax

Cardiomax has grown the market for garlic in the UK by expanding the awareness for the increasing weight of scientific evidence showing garlic's effectiveness in healthy heart maintenance. Garlic oil, in particular, has been widely used in studies throughout the world which demonstrate that it has an important role to play in normalising cholesterol levels.

## Sales opportunities

All this publicity has increased the number of customers coming into pharmacies looking for a product to maintain a healthy heart and circulation. For these customers, Cardiomax is the answer. With sales of over £1m since its launch last year it is proving the most popular choice with a growth rate in sales of 85 per cent recorded over the past six months.

## Support tops £1m

As British brand leader, Seven Seas Healthcare are investing in a massive new marketing programme for the Höfels range.

It includes:

- A powerful new multi-media advertising campaign which starts this month.
- New eye-catching point-of-sale material to encourage in-store sales, which is available from the Seven Seas sales force.



- Continued sponsorship of the Garlic Research Bureau whose stated aim is to increase the market for garlic and garlic supplements by expanding the awareness of its potential health benefits. The Bureau has an independent voice in reporting on the latest published scientific and research work.

## The First World Garlic Congress

David Roser, head of the Garlic Research Bureau, recently attended the first World Congress on the Health Significance of Garlic and Garlic Constituents. Here is his report.

I was fortunate to attend the First World Congress on Garlic which was held in Washington DC from August 28-30 this year. It attracted some 200 practitioners and scientists from over 30 countries. Over 40 new papers were presented from

delegates in the United States, Japan, India, Holland, China, Denmark, Belgium, Finland, Kuwait, Venezuela and the USSR.

Briefly, the Congress menu divided into four main areas.

1. The chemistry of garlic and garlic's nutritional and pharmacological actions together with new work on its organic chemistry and the pharmacokinetics of thioallyl compounds.
2. Studies on garlic's role in cardiovascular disease prevention with emphasis on platelet aggregation studies; its role in lipidaemia and atherosclerosis together with a three-year study on remfarcation versus a control group.
3. A considerable body of new literature was presented on garlic's potential role in cancer prevention including several studies proposing inhibition of initiation in cells challenged with known carcinogens.

Further new work on the function of intestinal organisms responsible for nitrosamine formation showed that garlic was potentially effective in preventing such formation by organisms such as *E. Coli* and *Fusarium moniliforme*.

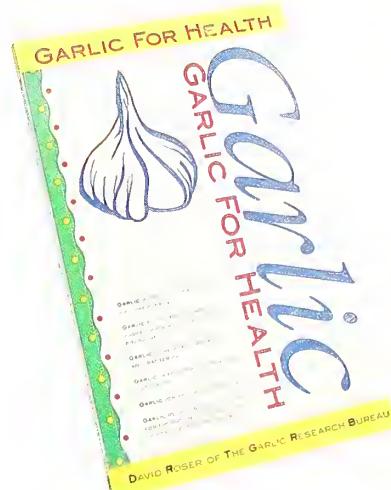
Studies showing garlic's action against the formation of melanoma and murine transitional cell carcinoma were also presented. In this area alone, there were 13 new papers.

4. Several papers concentrated on the anti-bacterial/anti-fungal and anti-viral potential of specific garlic extractives and its role as a potentially powerful antioxidant material was also examined. A further paper proposed that garlic contained potent anti-free radical activity, while another demonstrated studies indicating an anti-radiation action.

The conference was sponsored by Nutrition International Company and co-sponsored by the US Department of Agriculture and the Pennsylvania State University

## Guide to Garlic

"Garlic for Health" written by David Roser was published on the October 15. It is a complete consumer guide to garlic which covers not only the health aspects but the history of the plant, the folklore which has grown up around it; growing garlic, cooking with garlic, garlic for pets and much more. It has a retail price of £2.99, and is available to the trade through Martin Books Ltd, Fitzwilliam House, 32 Trumpington Street, Cambridge. Tel: 0223 66733.



# PHARMACY update

## Evening primrose oil — food and pharmaceutical

**Oil of evening primrose is widely used as a nutritional supplement and as an aid to the treatment of a number of conditions. Yet why is it of value in such a wide range of seemingly unrelated disorders? Mike Wakeman, MSc, MRPharmS, managing director, Efamol Ltd, reviews the history of the oil and its application in medicine.**

The evening primrose plant acquired its name because the bright yellow flowers look like primroses and because these flowers open in the evening and last only one day. The species originated in central America 70,000 years ago and has subsequently spread all over the world.

Most of the strays, however, came to Britain during the 18th century as stowaways in cargo ships carrying cotton. Even today there are areas around the major ports such as Liverpool, where evening primrose plants — descendants of the cotton ballast — grow in profusion.

In 1919, Heiduscka and Luft were the first to perform a detailed analysis of the oil, which they found to be rich in fatty acids. It contained one fatty acid never before identified, subsequently named gammalinolenic acid (GLA). Around the same time the family of fatty acids known as essential fatty acids (EFAs), which are derived from linoleic acid, were identified.

These are vitamin-like substances which cannot be synthesised by the body and have to be provided in the diet. They play important roles in all tissues, especially as components in cell membranes and as precursors of short lived regulating molecules, such as prostaglandins.

The first step in linoleic acid metabolism is the conversion to GLA by the enzyme  $\delta$ -6-desaturase, which is rate limiting. Since most of the biological actions of the essential fatty acids are performed by metabolites rather than by linoleic acid itself, this enzyme plays a key role in EFA metabolism.



In recent years the enormous attention paid to fish oils, which are a source of a different family of fatty acids (the n-3 EFAs), has to a large degree eclipsed the n-6 EFAs such as GLA. This is an oversight which has no foundation, based on experimental evidence which relates to the relative importance of the two series of EFAs. It is extraordinarily difficult to demonstrate any biological abnormalities in animals deprived only of n-3 EFAs.

## Malabsorption

Our diet in the West almost always contains sufficient linoleic acid, present in most green vegetables. However, in some situations malabsorption can occur, eg in cystic fibrosis, alcoholism and various gastrointestinal disorders. Various diseases have now been identified in which  $\delta$ -6-desaturase activity seems to be impaired and where dietary plasma and cell membrane linoleic acid levels are normal or even elevated, whereas the concentrations of the metabolites of linoleic acid are reduced.

The situation has been documented in humans with atopic eczema, premenstrual syndrome (especially premenstrual breast pain), diabetes, alcoholism and viral infections. Also factors such as ageing, stress, high cholesterol intakes, and diets high in saturated fats and trans-fatty acids (which are biologically inactive), have also been shown to reduce  $\delta$ -6-desaturase activity.

To test whether bypassing the block in linoleic acid metabolism, by administering GLA in the form of evening primrose oil, has a clinical effect, placebo controlled trials in these clinical conditions have been carried out. In almost all of the trials the evening primrose oil of choice was Efamol. (The oil is derived from varieties of evening primrose chosen to give seeds with a consistent GLA content). Although there are other sources of GLA, notably blackcurrant oil, borage oil and fungal oil, these have been found to have limited biological activity.

The reason is that the fatty acids in the oils are presented to the body on a glycerol backbone and the position of GLA on the backbone is different in each oil. The fatty acids in the oils are also different. Both of these factors combine to confer different biological activities to the oils. For example, borage oil, often used to "enrich" the GLA content of evening primrose oil, also contains erucic acid which, at high concentrations, is considered to be cardiotoxic. The GLA which is found in evening primrose oil and breast milk is present in its most life-compatible form.



Evening primrose oil has been, and still is, under clinical investigation for its use in a variety of conditions. It is available on prescription for eczema and now also for premenstrual and non cyclical breast pain. It also has a wide range of benefits as a dietary supplement because so many factors in our lifestyle block desaturation.

## Clinical conditions

### Dry skin and atopic eczema

Higher dosages have been shown to be of value in atopic eczema. Placebo controlled studies in many centres in several countries have established that evening primrose oil is significantly better than placebo in improving the clinical status of atopic eczema and especially in relieving itch. The use of anti-inflammatory steroids can at the same time be greatly reduced.

### Premenstrual syndrome (PMS) and breast pain

As in atopic eczema, the rationale is to correct an apparent deficit of  $\delta$ -6-saturated EFA's in spite of normal linoleic acid intake. Several double blind studies have confirmed that evening primrose oil is effective in relieving certain

PMS symptoms, breast pain in particular.

The effect is relatively slow to develop, because it depends on changing cell membrane structure of pain receptors and is often not complete for four to six months. Many women report a feeling of well being when taking evening primrose oil.

### Diabetic neuropathy

Essential fatty acids are important in neuronal membrane structure. The reduction of normal  $\delta$ -6-desaturase activity in the course of diabetes may be important in the pathogenesis of neuropathy. Controlled studies in both animals and humans have now demonstrated that administration of GLA in evening primrose oil can both prevent and reverse the neuropathy.

### Rheumatoid arthritis and related disorders

The rationale for the use of GLA in arthritis depends upon potent anti-inflammatory properties of prostaglandin E1 which is a metabolite derived from GLA. A combination of evening primrose oil and fatty acids found in fish oils is considered to be the ideal combination of EFAs to achieve the desired anti-inflammatory action. It has been demonstrated

to have a significant benefit in some clinical studies.

### Post-viral fatigue syndrome

Viruses are known to affect  $\delta$ -6-desaturase enzyme activity and following viral infections there are imbalances of EFAs and their metabolites. The administration of evening primrose oil together with fish oil not only helps normalise these imbalances but has a striking effect upon certain symptoms of the condition.

## In summary

In developed countries, a deficit of essential fatty acid intake is likely to be rare. However, there is increasing evidence that disorders of EFA metabolism associated with the inadequate rate of desaturation of linoleic acid are not uncommon. In these situations the direct administration of GLA in the form of evening primrose oil which bypasses the defective rate limiting step may be helpful.

Conclusions about possible benefits should only be based upon double blind placebo controlled trials. Such trials have now been carried out in several diseases and have shown that this is a rational low risk approach to therapy.

# BUSINESS NEWS

## Moss acquire Morgan

Moss Chemists have acquired the five pharmacies trading as G. Morgan Ltd in the Guildford area, bringing the number of pharmacies they operate to 90.

This acquisition is part of the general expansion of the company. By next February, Moss hopes to gain a further four branches: in Yateley, near Camberley; Nottinghamshire; within a new Asda store in Dagenham; and with their first concession with Tesco, in Thetford.

This latest purchase was completed last Thursday for a price that was "fair to both parties", says David Morgan, the previous owner. Family connections have been forged between the two families over the years, and he stresses that the sale was "extremely friendly". "It is like merging with old friends. I am happy that the G. Morgan business will be carried on by a company that still retains a family ethos."

Mr Morgan sold the pharmacies through Orridge, who say there were several interested buyers from the major chains.

Barry Andrews, managing director of Moss Chemists, says that the Morgan branches fit in well with the company's style. They are still trading under the Morgan name, but will transfer to Moss in the near future. There will be no redundancies.

David Morgan does not intend to retain an interest in the pharmacy business, saying: "I've given 30 years to pharmacy and I've still got a few years to go." He plans to pursue a new venture in property investment.

**AAH Meditel** have launched a computer software package enabling dispensing doctors to order supplies direct from sister company AAH Pharmaceuticals.

Practices ordering their supplies by this method automatically receive an additional 1.5 per cent discount on ethical purchases from any AAH wholesaler.

## Unichem to buy into German wholesaler

Unichem have moved to establish a European presence by taking an option to buy into a German pharmaceutical wholesaler.

The company has paid just DM1 for the option to acquire 17 per cent of PAG Pharma Holding AG, whose sole asset is a 30 per cent stake in Germany's largest pharmaceutical wholesaler, Anzag.

The purchase is dependent on Unichem's successful Stock Exchange floatation on November 15, and if the deal goes through Unichem chief executive Peter Dodd will take a seat on the PAG board. In fact, the acquisition of the option is largely a technical device to keep within Stock Exchange rules.

The deal has been valued at DM12.376m, or just over £4m, and will be met by an allotment of not more than 4 million Unichem shares — probably less — to PAG, representing maybe 3 per cent of the company. Two other shareholders in PAG, with 17 per cent a piece, are Germany's third largest pharmaceutical wholesaler Egwa-Wiveda, and the major Dutch wholesaler OPG. And because Egwa-Wiveda have 24 per cent of PAG in their own right, between the three of them they have effective control of Anzag.

The majority of the remainder of the PAG shares are held by German pharmacists.

The purchase is partly a defensive move. Peter Dodd told *C&D*: "I don't believe 1993 is going to see a bonanza in our industry, but I do see Europe dominated by a few major pan-European wholesalers in the future."

More positively, PAG is a promising vehicle for Unichem and their continental associates. When PAG was floated on the Frankfurt stock exchange it was done with the objective of acquiring controlling interests in pharmaceutical wholesalers in other countries; this makes it a useful acquisition vehicle.

Mr Dodd says that initially the potential for joint buying agreements will be limited, and that there is definitely no potential for the joint buying of pharmaceuticals — "the option does not exist today".

However, senior executives from Unichem, Egwa-Wiveda and OPG have set up a joint task force to look at the possibilities in the longer term. In fact these companies have a long established liaison between their senior executives, who have met regularly over a number of years.

## UBR spells Bad news

National Pharmaceutical Association director Tim Astill fears that the Government's decision to increase the uniform business rate by 10.9 per cent, based on September's high inflation rate, may well be the "last straw" for some pharmacy owners.

Small businesses and those whose revaluation was in the upper levels will be particularly vulnerable, he says. "Businesses are now being squeezed from all sides."

Mark Bradshaw of the Retail

Consortium agrees, and views this threat to pharmacy businesses as a community problem. "Small businesses have less ability to absorb costs. The news has come at a bad time, added to the relatively high level of inflation, interest rates, and increased competition," he says.

The 10.9 per cent increase in UBR is in addition to the annual increase resulting from the phasing in of the UBR over five years (this alone is 15 per cent for small businesses and 20 per cent for larger ones).

## Sickness top up plan from Pharmoney

The NPA's financial planning service Pharmoney has launched an extension to the sickness scheme operated by the Pharmaceutical & General Provident Society.

The PGPS's permanent health scheme is limited to providing a maximum of £312 a week to cover both business expenses, including for example the cost of hiring a locum, and personal income. Moreover this falls to 50 per cent after the second year and 30 per cent after the third.

However, Pharmoney's Income Protection Plus offers several ways to supplement this.

In the first year it makes a further £312 a week available to pay business expenses in the first year, releasing money from the PGPS scheme to be paid as personal living expenses.

After a year the Pharmoney top up scheme will pay 60 per cent of the pharmacist's income over £25,000, and 25 per cent of income in excess of £40,000.

The scheme will also pay the difference to make up the full amount when the PGPS scheme reduces by 50 per cent. And in the third year a tax shield built into the scheme pushes up income paid out when payments are reduced by 30 per cent.

Moreover, all these benefits can be bought individually or as a package. A spokesman for Pharmoney accepted that their top up scheme would be of most interest to pharmacists with incomes in excess of £25,000; "Up to £25,000 the pharmacist is reasonably covered by the PGPS scheme," he said. *Pharmoney*. Tel: 0483 740090.

**The Boots Co plc** and Mr Philip Birch, former chairman of the Ward White Group, jointly announced on Tuesday that Mr Birch has accepted a payment in the region of £1 million in full settlement of his claim arising out of the termination of his employment.



## Robinsons bring in expert to help restructure

Robinson Healthcare executives are fond of saying that "a few years ago when people thought of Robinsons they used to look for the opposite word to 'dynamic' to describe it, but not any more".

Eight months ago Robinsons took the dramatic step of appointing Andrew Lauder managing director with a brief to restructure the company and turn it around.

For a privately owned family business traditionally staffed at senior level by the Robinsons themselves, this was a shock to say the least, with Mr Lauder the first non-Robinson to be the company's managing director. 

### Cotton wool balls weigh in

made it clear at the interview I would run it as if it were my own company," he says.

Robinsons, whose core business centres on cotton wool and moist tissues, has lost direction over the past ten years. The company still has the biggest cotton wool unit in the UK and the second biggest in Europe, and Robinsons were the first to launch a tampon on the market and the first to launch disposable nappies; yet they have failed to make the most of these innovations.

"Partly it has been the scatter effect: the company has simply tried to do too many things; I had six factories under me when I arrived, including a paper mill and

a gauze mill. But these days the name of the game is specialisation," says Mr Lauder, and it is characteristic of his approach that since he took over the reins the company has closed its adhesive plaster manufacturing operation at Monton, North Manchester, and transferred production to their main site at Chesterfield and sold the paper mill.

Mr Lauder has a reputation as a company doctor, with an impressive track record in turning ailing companies around. He is credited with working the trick at the Waddingtons board game company in the early '80s, and more recently with Thomas Smith, the Christmas crackers makers.

He makes no bones about the fact that he had to do "an awful lot of sacking people," when he first arrived at Robinsons (though he is reluctant to put a figure on it). "A lot of people who couldn't accept change have had to go," he says.

Restructuring is a central part of the strategy and Mr Lauder is simply cutting out unprofitable business. "Robinsons had some 3,600 lines when I joined but by the end of the year there will be just 1,300," he said. At the same time some £1m has been invested in production plant.

Another strand of his strategy is to find high value, low volume products which Robinsons can market, and he has his eye very much on the American market for this type of tie-up. "Now we are getting companies coming to us and saying: can you sell our products for us into pharmacies?"

On the production side he has been determined to make existing systems more efficient, and here restructuring has been done with the aid of work study experts March Consultants.

The company has also adopted the Japanese "quality circle" concept, with the workforce encouraged to complain and offer ideas. "It has opened a floodgate and I'm not the most popular person with foremen and

Andrew Lauder, managing director at Robinsons

supervisors now," he says.

Like many a new managing director before him, Mr Lauder made a clean sweep of the existing marketing effort and introduced a uniform livery for Robinsons' products, to give them a higher profile in the market place.

Existing products have been given a new lease of life; the company's recently introduced rainbow cotton wool and shaped breast pads are very much in line with the new marketing strategy.

"Robinsons nursing breast pads have been in 90 per cent of pharmacies for years," says sales director David Tait, one of the management team whose track record pre-Lauder has made him a rare survivor in the new senior management environment.

When the company's longstanding square breast pad was challenged by a rival circular version the company fought back with a shaped breast pad challenging at the premium end of the market.

Similarly, wound dressings have been repackaged, doing away with their consumer-unfriendly packaging, dating from the days when the dressings were largely sold as prescription items and packaged to Drug Tariff

specifications. Now, on many of these items the pack not only shows the product itself but explains its use, and the results has been an increase in turnover the order of 30 per cent through increased front-of-shop sales.

Retrenchment will push turnover down from around £40m to £34m, and this year the company will show a loss. But the movement appears to be in the right direction.

"Robinson Healthcare will be a smaller company at the end of the year than at the beginning of it," says Mr Lauder. "This year will have been absolute hell, but next year should be exciting — then we will get the fruits of our hard work."

### BRIEFS

**The Seton Healthcare** group have bought the Slinky conforming bandage from Cuxson, Gerrard & Co for £1.25m. Seton have acquired packaging machinery, the trade mark and manufacturing rights. Existing stock of the bandage is to be valued and Seton will make a further payment, expected to be around £50,000, for it. Seton will also pay a 7.5 per cent commission on sales for the next five years.

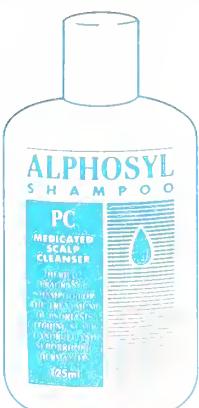
**Pharmax Ltd** have a new telephone number; it is now Crayford (0322) 550550.

**Boots have bought** a leasehold premises in Winchester High Street from the British Shoe Corporation.

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## Dual pricing unlikely on credit cards

Community pharmacists appear unlikely to take advantage of the Government's decision last week to allow dual pricing on goods bought with cash instead of credit cards.

Boots spokesman Mike Caldwell says: "We deal with 700 million till transactions a year. We've taken a positive decision that we will not introduce any form of discount for cash sales." The reasons are twofold. Firstly he believes there is no advantage to cash or credit cards, saying: "It's swings and roundabouts, since any handling of funds, whether it

be cash, cheques or credit cards has a cost to it. Secondly, introduction of anything that involves delays at the tills is bad news for customers."

National Pharmaceutical Association director Tim Astill commented that a surprising number of pharmacies do accept Access and Visa. However, he had not yet received any feedback from members as to whether they will be affected by other retailers, or if they would offer the cash discount. "My bet is that pharmacists won't bother," he speculates.

Mark Wilsey, assistant director at the Retail Consortium, says: "I don't think the smaller shops will bother, because the average value of purchases is very small." He expects retailers of expensive items such as jewellery and hi-fi to take the most advantage of dual pricing.

## Discounted French perfumes

French perfume houses' grip on the retail market may be further weakened by a new entrant into the parallel import/discount market for premium products.

Fashion retailer Philip Green plans to sell discounted famous brands such as Miss Dior, Poison and Chanel No 5 through his 40-strong discount chain in the North of England and Scotland, What Everyone Wants.

Discounting famous-name perfumes is not new to community pharmacy however. With the perfume houses demanding higher and higher order levels many community pharmacies have been forced to buy from parallel importers or abandon the lines altogether.

Deputy managing director of

Doncaster Pharmaceuticals Dorothy Bradley told C&D: "We have been doing this for years; perfumes are small, high value products and it fits in beautifully with the pharmaceuticals trade."

Commenting on Mr Green's intention to sell 100ml bottles of Poison with a recommended retail price of £51 for £34, Mrs Bradley told C&D: "That tells you how little he knows about the trade; 50ml is the popular size."

As part of their continuing integration of subsidiary companies, DPG have commissioned a £250,000 computer system. Now customer orders can be modemed directly to the central warehouse in Doncaster and the items deducted from stock records.

## Management control Quest

The management of Quest Vitamins UK Ltd have bought the 60 per cent shareholding in the company not already owned by the management, from Quest Vitamin Supplies Ltd in Vancouver, Canada. They continue to retain a significant interest in the shareholding of Quest in Canada.

The terms placed the value of the UK company at £3 million. Managing director Dr Ahmed Hassam said this week he expected the company to benefit significantly from the complete ownership by and the continued involvement of local management.

While the Canadian company will remain one of the major suppliers, the new independent company will still identify products it can manufacture in the UK.

Currently about half the products are manufactured locally. The export market has developed significantly over the past few years, with Quest supplements being available in many European and Middle Eastern countries.

**Numark chairman Douglas Low**, of John Hamilton (Pharmaceuticals) Ltd, called for "co-operation, not confrontation" between suppliers, wholesale and retail members of Numark last week. He urged suppliers and member pharmacists to match Numark's own substantial investment programme by strengthening their own support to the Numark partnership. He was speaking at Numark's first Suppliers' Day, held at the National Motorcycle Museum, Birmingham.

## COMING EVENTS

### Unichem to cruise the Caribbean

Unichem have announced details of their 1991 convention.

Delegates will take a ten day cruise on the Regal Princess from October 4 visiting Fort Lauderdale, Nassau, Montego Bay, Grand Cayman Island and Cozumel before returning to Florida on October 14.

Prices start at £1125 per person and a programme of extensions has been arranged to such places as New Orleans, Puerto Rico and New York. For details contact Soler Touriste on 081-391 2323.

### RPA conference

The Rural Pharmacists Association conference will be held at The Livermead House Hotel, Torbay Road, Torquay from November 24-25.

The conference theme will be "Whither pharmacy" and speakers will include Council member Noel Baumber, RPA chairman Roger King, and Mary Tompkins, principal pharmacist, priority care and community liaison, NE Thames RHA.

The cost is £65 including accommodation, £20 for the Sunday only. Details from John Davies, The Firs, Langley Marsh, Wiveliscombe, Taunton, Somerset.

### Macmorran lecture

The Macmorran lecture will be held at the Royal Pharmaceutical Society's Scottish Department at 36 York Place, Edinburgh on November 14 at 7.45pm.

The speaker will be Rev Dr John Harrison, currently vice-president for Scotland of the Royal Meteorological Society. He will talk on "Global warming — predicting the uncertain". Details from Dr G.C. Jefferson on 031-556 4386.

### Monday, November 12

**Southampton Branch, RPSGB.** Postgraduate centre, Southampton General Hospital, at 7.30pm. "Topics for Council and other home truths" by Alan Nathan, Council member.

### Tuesday, November 13

**Lanarkshire Branch, RPSGB.** Old Mill Hotel, Motherwell, at 8pm. Talk on topical issues by Peter Curphey, Council member.

**Leicestershire Branch, RPSGB.** Guided Leicester walk, meet in town centre. Details from Effie Smith.

**South East Metropolitan Branch, RPSGB.** Medical centre, Lewisham Hospital, at 8pm. "1991 and all that" by Jane Nicholson, Council member.

### Wednesday, November 14

**Dumfries and Galloway Branch, RPSGB.** Dumfries and Galloway Royal Infirmary, at 7pm. "Whether pharmacy?" by Peter Curphey, Council member.

**NPA East Kent Branch.** "Monitored dosage systems — an independent view" by Mary Allen at the Postgraduate centre, Kent and Canterbury Hospital at 8pm. Details from P.A. Baker on 02273 72185.

**Isle of Wight Branch, RPSGB.** Postgraduate centre, St Marys Hospital, Newport, at 8pm. "Drug abuse on the Isle of Wight" by Sarah Weech.

**Stirling and Central Scottish Branch, RPSGB.** The Boardroom, Bellsdyke, at 8pm. A working demonstration of View Data Drug Information System by Mrs C. McKenzie and "COSH — a shared experience" by Mr S. Peddie.

### Thursday, November 15

**Bedfordshire Branch, RPSGB.** Coach and Horses, Barton le Clay, at 8pm. "The pharmacological aspects of archaeological discovery at Souta Hospital" by Dr B. Moffat.

**Northern Scottish Branch, RPSGB.** Postgraduate centre, Raigmore Hospital, Inverness, at 7.45pm. "The White Paper — Formulary management and indicative budgets" by Mr W. Scott, deputy chief pharmacist.

**Applied Pharmacy Practice Learning Events.** "Babycare: nutritional and medicinal perspectives" at Killyhevlin Hotel, Enniskillen at 7.30 for 8pm. Continued on November 22. Details from Donna McDowell on Belfast 650111 ext 761.

### Saturday, November 17

**Wirral Branch, RPSGB.** Annual dinner at the Grove House Hotel, Wallasey.

### Advance information

**Society of Cosmetic Scientists.** "The future of haircare technology" at the Old Swan Hotel, Harrogate on November 19-20. Details from Mrs K. Weston on 0582 26661.

**RPSGB.** "Tabletting technology" residential course at Crest Hotel, York from November 19-21. Cost £700. Details from Mrs B. Cockburn on 071-735 9141.

**The Royal Society.** The Wellcome Foundation lecture — "The T-cell repertoire" by Dr P.C. Marrack and Dr J.W. Kappler at 6 Carlton House Terrace, London SW1. November 20 at 6pm. For details, ring 071-839 5561 ext 205.

**RPSGB.** One day meeting on "Drugs in use in psychiatry". RPSGB headquarters on November 21. Details from Mrs B. Cockburn on 071-735 9141.

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LOU LOU 100ml EDP Spray	C5141	6	37.00	25.90	20.72
LOU LOU Dusting Powder	C5148	3	22.50	15.75	12.60
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# ABOUT PEOPLE

## First successes in new CPP exams

The first three associates to gain membership of the College of Pharmacy Practice through the new membership examination scheme are Mr Surinder Singh Bassan, Mr Rajesh Kumar Parekh and Miss Margaret Malone. Their membership was obtained through taking the two compulsory assessments (assessment A and D) together with other assessments, and gaining exemption points.

The following candidates satisfied the examiners in assessment D (practice workbook): Claire Anderson, Surinder Singh Bassan, Michael Daly, Christopher Galloway, Arthur Jeves, Rene Lai, Peter Leslie, Clare Mackie, Jane McVea, Margaret Malone, Asher Mohammed, David Pack, Rajesh Kumar Parekh, Hamida Patel, Andrew Platten, Brian Rayner, Christina

Smith, Alexandra Wood.

The following have satisfied the examiners in assessment E (structured practical): Claire Anderson, Susan Ashwell, Peter Beagon, Carole Blackshaw, Michael Daly, Christopher Galloway, June Grant, David Holland, Catherine Jackson, Rene Lai, Clare Mackie,

Margaret Malone, Asher Mohammed, Margaret Norval, Rajesh Kumar Parekh, Andrew Platten, Brian Rayner, Susan Smith, Alexandra Wood.

Keith Farrar has fulfilled the College membership examination requirements under the transitional arrangements.



Pharmacist Jeffrey Max (right) of Park Pharmacy, Aintree, Liverpool is shown receiving his voucher for a fortnight's holiday for two in the Seychelles from Fred Wilding, Elida's wholesale development manager, and (far left) Chas Court, wholesale chemist manager. Mr Max is winner of the Elida Gibbs "Spot-the-Beachball" Chemex competition

## Snowfire Chap takes Night Nurse

Snowfire Chap, the steeple-chasing racehorse of J. Pickles & Sons, is off to a good start this jumping season.

Red hot favourite in the Night Nurse Trophy Handicap Steeplechase at Sedgefield last Wednesday, he won by six lengths. This followed a close finish at Southwell, when he was beaten by only half a length.

If you want a prediction of Snowfire's chances, phone 0423 867314 before 9.30am on the morning of a race, and ask for Simon Horner or Jeff Mellor.

Simon Horner (left), managing director of J. Pickles & Sons, North Yorkshire, is presented with the Night Nurse silver trophy by Paddy Broderick. Mr Broderick rode Night Nurse to win the Champion Hurdles in both 1976 and 1977



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## APPOINTMENTS

**Evans Medical Ltd** have appointed Michael J. Harvey as operations director. He will be based at the Speke factory where production of all British made vaccines will be centred.

**Porton International Plc** have appointed Dr Geoffrey Sheppard as managing director of Porton Cambridge Ltd. He will be responsible for the development of the company's worldwide diagnostic kits and assay business.

**Senelco UK Ltd**, retail loss prevention specialists, have appointed David Scouse as managing director.

**Nielsen Marketing Research** have announced a major restructure of their senior management team as a result of their move toward European integration. Mike Gorton, managing director of Nielsen Great Britain, has been promoted to regional director for the new Nielsen region of Northern Europe, where he will supervise and coordinate Nielsen activities in Denmark, Finland, Great Britain, Ireland, Norway and Sweden. He has been replaced as managing director of Nielsen Great Britain by David Charlton-Jones, previously deputy managing director.

Three new appointments are made to the board of Nielsen Great Britain. Colin Buckingham takes up the position of marketing director while Paul Dickinson and Mike Penford become customer service directors for Nielsen's health and beauty/durables and food and drink divisions respectively.

**Dr Peter Doyle**, ICI's research and technology director, has been appointed a member of the Medical Research Council. He is one of only two industrialists currently on the Council. His appointment is for four years, until 1994. Dr Doyle was appointed to the ICI board in January 1989. Previously he has been deputy chairman and technical director at ICI Pharmaceuticals for three years.



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